



St. John's CE Primary School

Growing and learning together
Sharing the love of God

Headteacher: **Amanda Aze**
Chair of Local Advisory Board: **Vivien Sloan**

Coombe Avenue, Weymouth, Dorset, DT4 7TP
Email: office@stjohnswey.dsat.org.uk
Website: www.stjohns.dsat.org.uk
Tel: 01305 785711 7th September 2026

Dear Parents/Carers,

Year 4 trip to Dorchester Museum – Friday 2nd October

As part of our Roman topic, Year 4 will be visiting Dorchester Museum on Friday 2nd October. The coach will leave at approximately 9am and will arrive back before the end of the school day.

The cost of the trip is £19 per child. This is a voluntary contribution however, if we do not collect enough funds for the entrance fee and travel, the trip will be unable to go ahead. Pupil Premium children will receive a discount, and the total cost payable is £14. Please book and pay for your child's place via The Arbor App. Please go to 'Quick Actions', click on 'Trips' and select 'Year 4 Dorchester Museum'.

Please ensure that your child has sensible shoes, a waterproof coat, a packed lunch and a drink. If your child has a free meal entitlement or if you have already ordered a hot meal for this day, then Food Links will provide a packed lunch option.

Please complete the reply slip attached and return to the Year 4 classroom by Monday 28th September.

Yours sincerely,

Miss Turner
Year 4 Teacher



Year 4 trip to Dorchester Museum – Friday 2nd October. Please complete the reply slip attached and return to the Year 4 classroom by Monday 28th September.

I give permission for _____ to visit Dorchester Museum travelling by coach.

YES/NO My child suffers from travel sickness and I have provided _____ to alleviate the symptoms.

[] I have completed a medical form for the return journey. (Please ensure any medication is handed to the class teacher or TA with a completed medication form)

I consent to any medical treatment deemed necessary during the course of the visit.

I DO / DO NOT consent to photographs of my child being taken by St John's school staff.

I DO / DO NOT consent to photographs of my child being used on the school Facebook page.

We would appreciate any parent helpers with this trip – please tick the box if you would like to come with us []
If you are required, you will be contacted by the class teacher with additional information. Thank you in advance.

Emergency Contact Name: _____

Tel No: _____

Signed _____ Print _____



Parent/Carer Date: _____
Diocese of Salisbury
Academy Trust
'Beyond expectations for all of God's children'