



Headteacher: Mrs J Simpkins  
B.Ed NPQH

*'A caring school where every child matters' (OFSTED)*

Newburgh Primary School  
Kipling Avenue  
Warwick  
CV34 6LD  
Telephone: 01926 775453  
Email: admin2325@welearn365.com

3<sup>rd</sup> July 2019

### Year 5 Merchant of Venice October 2019

Dear Parent(s)/Carer(s),

On **Wednesday 2nd October 2019** Year 5 will be visiting the RSC (Royal Shakespeare Company) to watch Merchant of Venice. This will support childrens' learning in the spring term. The price of this will be **£10** per child. This includes a ticket for the performance and transport.

In order to get the most out of the day we intend to have a picnic and spend some time looking at places of interest around Stratford. Therefore children will need to bring a packed lunch, snack and water bottle with them. Please pack the school lunch in a disposable bag so they can throw away once finished. We have school rucksacks children can use for water bottles. Children who usually have a school dinner (free or paid) can be provided with a school packed lunch. Please indicate your choice on the reply slip below. We will be back at school by **3:15pm for normal pick up time**.

#### Important information:

Uniform:	Normal school uniform and a coat.
Lunches:	Please order a lunch on the reply slip below OR bring own packed lunch.
Medial information/medication:	Please ensure all school records are up to date. Prescribed medication can be given during the trip, please hand it to a teacher in a clear plastic bag, complete with all prescribing instructions (e.g pharmacist label). A permission form can be obtained from the office in advance.
Special Arrangements:	N/A

Children will not need any money to spend.

If you have any queries regarding this visit, please do not hesitate to speak to us at the end of the school day or contact us via email admin2325@welearn365.com.

Yours sincerely

Miss Reid  
Year 5 Teacher



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## REPLY SLIP

### Year 5 Merchant of Venice October 2019

I give permission for .....to attend the educational visit to **RSC** on **Wednesday 2<sup>nd</sup> October 2019**.

#### Lunches:

- ☐ Please order my child a packed lunch   ☐ Cheese   ☐ Ham   ☐ Tuna (please tick)  
☐ I will provide a packed lunch from home

#### Payment:

- ☐ I understand that payment of **£10.00** should be made via ParentPay by no later than **6<sup>th</sup> September**

#### Medical conditions:

My child has the following medical notes to be aware of:

*Please ensure all school records are kept up to date. Prescribed medication can be given during the trip, please hand it to a teacher in a clear plastic bag, complete with all prescribing instructions (e.g pharmacist label). A permission form can be obtained from the office in advance.*

Name: .....

Signed  
(parent/carer): .....

Date: .....