



26 January 2024

Dear Parent/Carer

RE: TRIP TO THE KING JOHN SCHOOL– TUESDAY 12 MARCH 2024

I am delighted to inform you that your child has been chosen to go on an Maths Feast at The King John school in Benfleet on Tuesday 12 March 2024. The purpose of the trip is to improve problem-solving skills by using recreational maths and to improve teamwork and communication skills.

We will be travelling by minibus to The King John School in Benfleet, leaving the Academy at **11.00 am** and returning to the Academy at approximately **4.00 pm** (traffic permitting). Alternative arrangements will need to be made for your child's journey home from the Academy on this day.

Students **must** bring with them a packed lunch and a bottle of water. Students entitled to free school meals will have a lunch provided for them and this will be collected for them on the day. Students are required to wear school uniform.

I am sure that you will agree that this is an exciting opportunity for your child and ask that you complete the reply slip below and return this to **your Maths teacher by Friday 16 February 2024**. Students who do not complete and return the consent form will not be allowed to take part in this visit. If you have any questions or comments regarding this trip to The King John School please do not hesitate to contact Mrs. Kelly via email at lisa.kelly@theglc.org.uk. Details of this trip will also be added to the Academy website.

Yours sincerely

Mrs L Kelly
DIRECTOR OF MATHS AND SCIENCE

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REPLY SLIP - TRIP TO THE KING JOHN SCHOOL – TUESDAY 12 MARCH 2024

I Parent/Carer of: _____ (Student Name) would like him/her to participate in the trip to The King John school, Benfleet on **Tuesday 12 March 2024**.

Details of my child's food allergies and medical conditions: _____

*I will make arrangements for my child to be collected from The Gateway Academy at 4.00 pm ☐

*I am happy for my child to walk home from The Gateway Academy at 4.00 pm ☐

**Please tick as appropriate*

Emergency Contact Name _____ Emergency Contact Number _____

Signed _____ (Parent/Carer) Dated _____
(Please return this reply slip to your child's Maths Teacher by Friday 16 February 2024)

