

**Wootton St Andrew’s Church of England Primary School**

Headteacher Mrs R Zaitschenko



 Telephone: 01469 588361

High Street

Wootton

Nr Ulceby

North Lincolnshire

DN39 6SG

7th October 2024

Dear Parent/Carer

**PGL Residential Trip – Summer 2025**

We are pleased to announce a trip to PGL Residential for our Year 6 pupils. Please find below a brief summary of information about the trip. Further information will be sent home nearer the time.

**Venue:** PGL Caythorpe Court

**Duration:** Friday 13th June 2025 – Monday 16th June 2025

**Price:** £190.00 per person – payable on ParentPay

**Payment Plan: Deposit -** £60 due by 31st October 2024 – non refundable

 **Interim Payment** £65 due by 31st December 2024

 **Final payment** £65 due by 28th February 2025

**KIT LIST**

* sleeping bag, pillow, teddy (compulsory!)
* old, casual clothes which are easy to wash(names in but **no jeans**) please pack spares as there are no laundry facilities on site
* spending money in a named envelope (no more than £20)
* one luggage bag which your child can carry themselves
* two pairs of shoes (as one pair will get wet during the raft building)
* party clothes for the Saturday disco
* shower gel and toiletries (please send only roll-on deodorant as aerosols set off the fire alarms)
* Long sleeved top (required for some activities)

***Children will not be permitted to bring mobile phones or other electronic devices but staff will carry a school mobile and the children will use school cameras/i-pads to take pictures.***

Further information, insurance details and pictures of Caythorpe Court can be found on their website www.pgl.co.uk

If you have any queries or questions regarding the trip, please do not hesitate to contact us, the trip is a fantastic experience for the children.

Yours sincerely,

Mrs R Zaitschenko

Headteacher

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**Declaration**

I have read the PGL Information Sheet online and agree to my child’s participation in the activities described. I believe that the information I have provided is correct and will notify the course organiser of any changes as soon as possible. I agree to my child receiving medication as instructed and to any emergency dental, medical or surgical treatment as considered necessary by the medical authorities present. I understand the extent and limitations of the insurance cover provided.

The personal information supplied will only be used to allow PGL employees, agents, subcontractors and suppliers to provide the promised service to PGL’s normal high standard.

Signature of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_