



Queen Eleanor's Church of England Junior School

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Year 3 Sleepover – Thursday 20th September 2012

Dear Parents,

We are very pleased and excited to be able to give you more details of our planned sleepover for our new Year 3 children. It will take place in school and should be a wonderful opportunity for them to forge new friendships and enjoy getting to know us and each other.

Our plan is for the children to arrive in school on Thursday 20th September as normal – in school uniform but with everything they need to spend the night here. A kit list is outlined below. Please pack the bag/case with your child so that they are aware of what they have with them and can successfully repack this on their own. We suggest a contents list is attached to the inside of the bag/case to help them.

During Thursday afternoon and evening we will embark on a series of teambuilding games and activities, as a whole year group, based in school. We will then continue the fun and games on Friday and you will be able to pick up your child at normal time on Friday afternoon.

We will feed the children a simple supper on Thursday evening and breakfast on Friday morning. Please provide any dietary information on the form attached. We are not asking for any money to cover the cost of this event but we would very much like every child to be a part of this activity. If you or your child have any concerns please do speak to their class teacher so we can help to reassure you.

If your child has a packed lunch you can bring it to the office on Friday morning (a box will be provided). Please can you be reminded that the school operates a 'No Nut' policy and we would ask parents to check their child's packed lunch carefully. Alternatively, you can choose to pay for a school dinner for that day. If your child currently has school dinners, they will just choose as normal. Please indicate your preference on the reply slip on the bottom of the parental consent form. Please can you ensure that both of the attached forms are completed and returned to school no later than Friday 14th September.

Kit List:

- Change of clothes and trainers
- A sleeping bag and pillow (and possibly a roll mat for comfort)
- A pair of pyjamas (and slippers if preferred)
- Toothbrush and toothpaste
- A torch
- A teddy
- Contents list

Year 3 Teachers

Alice Clement-Smith & Lorna Hines

YEAR 3 SLEEPOVER – MEDICAL/EMERGENCY INFORMATION

Thursday 20th September 2012

Please would you kindly complete this form and the parental consent form as soon as possible and return them to school no later than **Friday 14th September**, so that we may compile the information we need prior to the sleepover. If you need more space for your answers, please continue on the back page or on a separate sheet of paper.

Child's Full Name:	Class:	Home Telephone Number:
Date of Birth:	Place of Birth:	
Home address:		
Name & Address of Parent/Guardian and where can be contacted in an emergency during the visit:		
Emergency Contact Telephone Numbers: DAY EVENING MOBILE		
Name & Address of Doctor:	Doctor's Telephone Number:	
Does your child suffer from any medical conditions or allergies? YES/NO	If yes, please give details below:	
Is your child currently taking any medication? YES/NO	If yes, please give details below:	
Does your child require a special diet? YES/NO	If yes, please give details below.	
Is there anything else we should know about? For example, bed wetting, sleep walking etc. YES/NO	If yes, please specify	

YEAR 3 SLEEPOVER – MEDICAL/EMERGENCY INFORMATION (cont'd)

	Inhaler	Epi Pen
<p>If your child requires any form of medicine during this visit, including travel sickness pills, epi-pens or if your child suffers from asthma and may need to carry an inhaler with them, please give details opposite:</p> <p>All medicines should be clearly labelled with child's name, exact instructions and given to a member of staff at the beginning of the visit. In the case of inhalers please only give 1 to a member of staff which will be for emergency use only. The other is to be retained on the child at all times.</p>	<p>If needed please ensure you provide <u>2</u> for this activity.</p>	<p>If needed please ensure you provide <u>2</u> for this activity.</p>
<p>Does your child have a birthday during the sleepover? YES/NO</p>	<p>If yes, please give date:</p>	
<p>I consent to my son/daughter being given a mild painkiller (e.g paracetamol) if considered necessary by the party leader.</p>	<p>YES/NO</p>	
<p>Does your child have any physical problems which may prevent them joining in the activities? If yes, please specify.</p>		

PLEASE COMPLETE AND RETURN TO SCHOOL NO LATER THAN FRIDAY 14th SEPTEMBER

YEAR 3 SLEEPOVER – PARENTAL CONSENT FORM
Thursday 20th September 2012

I wish my son/daughter in class to be allowed to take part in the above mentioned school activity on the date specified and having read the information sheet agree to them taking part in all or any of the activities described therein.

I have ensured that my child understands that it is important for their safety and for the safety of the group that any rules and instructions given by the staff in charge are obeyed.

I certify that so far as I am aware my son/daughter is medically fit* to undertake activities and there are no known health reasons why they should not do so. I authorise medical treatment to be provided should this become necessary during the course of the sleepover.

I understand that those supervising the sleepover are in loco parentis and must exercise a standard of care that would be expected of a reasonably prudent parent. The County Council will not be responsible for personal injury or any other damage or loss unless it is negligent.

I will drop a packed lunch into school on Friday 21st September for my child

My child is already having school dinners

My child would like a school dinner on Friday 21st September and I enclose £2

Emergency contact number for 20th September:

*Please give details on the MEDICAL/EMERGENCY INFORMATION form provided if your son/daughter suffers from any medical condition which, whilst not affecting their ability to undertake this sleepover, you consider the Party Leader should be aware of.

Signature of Parent/Guardian Date

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