



Rise Park Primary and Nursery School  
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23rd March 2026

Dear Parent/Carer of

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We are excited to be able to confirm a few more details about our trip to Gulliver's Kingdom on 18<sup>th</sup> June 2026.

Timings have now been confirmed. We will be leaving school at 9:30am on Thursday 18<sup>th</sup> June and returning at approximately 12:30pm on Friday 19<sup>th</sup> June. You will then be able to collect your child from school and take them home for the afternoon. You will be updated regarding timings by text on the day.

This means that on the Thursday we will have lunch and dinner provided at Gulliver's and on the Friday morning we will also have breakfast. We will not have lunch on the Friday so your child will need lunch with you when they get home.

We are still awaiting confirmation of our full itinerary of activities, but we will share this with you when it has been confirmed but it promises to be a lot of fun!

Attached to this letter is a kit list of items your child will need. Please ensure everything is named (sleeping bags and roll mats often look very similar to each other!). Your child will need to be able to carry their own belongings.

Next steps:

Please complete the following and return to school by **Friday 25<sup>th</sup> April 2026.**

- The OV4 form – please ensure all areas of the form are completed and that any medication your child requires is recorded clearly on this form.
- The information about meals and your child's height – some rides have height requirements which is why we need this information.

As a reminder, any outstanding payment needs to be paid by Friday 15<sup>th</sup> May 2026.

Your child's current outstanding balance is £\_\_\_\_\_.

Please ask if you have any questions at all.

The year 2 team



Please complete the following information and return to school by **Friday 24<sup>th</sup> April 2026**

Child's full name \_\_\_\_\_

**Meal choices**

For the lunch on Thursday the children will receive a packed lunch. Please choose your child's sandwich filling (tick one).

<input type="checkbox"/>	Cheese
<input type="checkbox"/>	Ham
<input type="checkbox"/>	Tuna
<input type="checkbox"/>	Egg mayo
<input type="checkbox"/>	Vegan cheese

For dinner on the Thursday, the children have the choice of:

<input type="checkbox"/>	Cheese and tomato pizza and fries (vegetarian)
<input type="checkbox"/>	Jacket potato served with beans (vegan and gluten free)

There will also be a salad bar with lettuce, tomato, cucumber sticks, sweetcorn & GF plain pasta.

Dessert will be:

<input type="checkbox"/>	Icy lolly (gluten free and dairy free)
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If you have any specific meal questions, please speak to a member of the year 2 team.

**Height**

Some of the rides which we may go on have height restrictions therefore we need to know your child's height in centimetres.

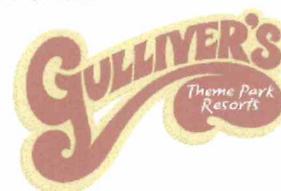
My child's height is \_\_\_\_\_ cm.

Please sign to confirm that all the information you have provided is accurate. Thank you

Signed \_\_\_\_\_

Print name \_\_\_\_\_

# Year 2 residential packing list



## All children will need:

### During the day

- Sturdy trainers/outdoor shoes.

We will be walking all day on steep terrain.

Sandals, sliders or crocs are not appropriate.

- Comfortable outdoor clothes.

Skirts/dresses are not advised. Layers are helpful.

- A waterproof jacket.

### Essentials

- Sun cream
- Sun hat
- Water bottle
- Rucksack (for children to carry their own personal items).



### Night Time

- A sleeping bag
- A roll mat - no inflatable mattresses will be taken
- Pyjamas
- Toothbrush, toothpaste and flannel.
- A change of clothes for Friday



### Optional

- Disposable camera
- Torch
- Pillow
- A teddy for night time
- Spending money for the shop – we recommend no more than £15. This must be in a named and sealed envelope and will be held by staff until needed.

### Please Note

We will not be taking electronics of any kind. This includes mobile phones, tablets, digital cameras and hand-held game devices.



No midnight snacks please, all food will be provided.

Everything must be clearly labelled with your child's name. We will remind and support, but children are encouraged to be responsible for their own belongings.

## CHILDREN'S SERVICES – OV4

### CONFIDENTIAL CONSENT FORM FOR YOUNG PEOPLE (to be distributed with full details of the visit)

#### 1. CONSENT FOR PARTICIPATION IN THE VISIT:

Visits during the academic year: 2025 - 2026

Activities to be undertaken: \_\_\_\_\_

Date(s) / Times: \_\_\_\_\_

**I agree to my son/daughter:** \_\_\_\_\_ **(name)** taking part in the above-mentioned visit and, having read the information provided, agree to his/her participation in any or all of the activities\* described. I acknowledge the need for obedience and responsible behaviour on his/her part. I understand the extent and limitations of the insurance cover provided.

\*If there are any activities in which your child cannot participate, please give details: \_\_\_\_\_

**I give permission** for my son/daughter's name to be included in the collective passport to be held by the group leader: (please circle)

**YES / NO / NOT APPLICABLE**

If water activities are involved, is your child confident in water? (please circle)

**YES / NO / NOT APPLICABLE**

#### 2. MEDICAL INFORMATION, DECLARATIONS AND CONSENT:

a) Son/daughter's date of birth: \_\_\_\_\_

b) Does your son/daughter suffer from any conditions of which the staff leading the visit should be aware:

**YES / NO**

Please give details of anything the leader needs to know about to safety care for your child e.g. illness, travel sickness, allergies, night-time tendencies (sleepwalking, nightmares, bed-wetting) etc: \_\_\_\_\_

c) Details of any medication

Name of medication	Dosage	Times of day or circumstances to be given	Method of administration

Any special precautions, side effects of medication etc: \_\_\_\_\_

**I give my consent \*\*** for a member of staff to administer the above medication which I will deliver to the group leader before the visit. I understand the staff leading the visit are not qualified medical practitioners but that they will take reasonable care in the administration of the medication and will endeavor to respond appropriately should emergency treatment be required.

**I give my consent \*\*** for son/daughter to self-administer the above drugs.

**\*\* Delete if not applicable**