

YEAR 6 VISITS TO FAIRFIELD HIGH SCHOOL

My child..... (**Name**) from (**School**)

has permission from the school and **will** be able to take part in the visits to Fairfield High School on:

Thursday, 28 June *

Thursday, 5 July*

Friday 13 July *

*Please delete any dates that your child will **not** be able to attend.

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

Please print name of parent or carer:

Contact telephone number(s) in case of emergency:.....

Please tell us any important medical information e.g. allergies etc.

.....
.....
.....
.....

MEETING FOR PARENTS / CARERS OF YEAR 6 STUDENTS

I / We will attend the meeting on **Thursday 28 June from 5pm to 6.30pm.**

Number attending:

OR

I / We regret we are unable to attend the meeting on **Thursday 28 June.**

*Please complete or delete as appropriate.

Signed: Date: