



Whitstable Junior School

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17th May 2019

Dear Parents and Carers

As you know, children in Year 4 have been working with Turner Contemporary Gallery in Margate, for this year's START project. The Gallery has also been working with other schools in the Coastal Alliance and, as a result, is holding a public exhibition of children's photography, celebrating their relationship with the sea. We have been invited to attend the opening of the Exhibition which takes place at the Gallery next **Thursday (23rd May) from 5.30 – 7.00pm.**

I will be attending along with Mrs Fry and some other teachers, but we would very much like it if a number of our wonderful children could also come with us to represent the school and experience a private view in a world-class gallery.

As your child has shown a keen interest in art, we feel that they would benefit greatly from the opportunity. If you would like your child to attend – and **if you are able to transport them to and from the Gallery** – please could you let me know as soon as possible by returning the attached slip **NO LATER THAN MONDAY 20th MAY**. You would, of course, be more than welcome to attend with them and we can organise tickets for you if this is the case.

If you are particularly keen that your child should go but are unable to take them there, I would be able to offer lifts for two children in my car. Should it arise that more than 2 children need to travel with me we will allocate places randomly and let you know if your child has been a lucky one. Please let the School Office know **by return** if this is the case. **You would need to bring your child to WJS at 4.45pm** and I will aim to return to school for **7pm** (I will be leaving Margate at 6.30pm), when you would need to collect your child in person.

Kind regards,

Annie Knoupe
Headteacher

Year 4 Turner Gallery Visit – 23rd May 2019

Please complete and return to Mrs Fry by Monday 20th May 2019.

I/We give permission for _____ (pupil name) in Class _____ to take part in the trip to Turner Gallery on Thursday 23rd May 2019.

I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment including anaesthetic or blood transfusion, as considered necessary by the medical authorities present (please contact the school if you require further information or explanation).

My emergency contact number on the day is _____

Name _____

Relationship to child _____

Signed _____

Date _____

