



Whitstable Junior School

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Monday 8th October 2018

Dear Parents / Guardians,

An exciting trip to Thornden Woods- sustainable art and sensory trail.

As part of enriching the children's experiences, we have arranged to take our Year 6 children to explore Thornden woods on **Tuesday 16th October**. We will be exploring the Wild Art Trail that was developed by the Kent Wildlife Trust and the children from Herne Bay Juniors. For those of you unfamiliar to the trail, it is a family friendly, 1 mile circular trail that allows the children to discover sculptures, woven creatures, children's art and historic features.

Whilst at the woods the children will also complete observational drawings of the environment, collect leaves for classification, look for signs of decay (linked to our science theme) and discuss the topic of deforestation. We will explore the nature and the types of trees that they can see and compare it with their knowledge of the rainforest studied this term.

Once back at school, children will learn how to classify their leaves looking at their shape, edges, veins and size, compare and contrast what they have seen with Rainforests, their knowledge of biomes and create artwork based on their experiences. We will also look at our journey there and back on an ordinate survey map to develop their map reading skills.

The children will be travelling to and from the woods in our mini buses, during the school day and will be back before lunchtime. The only preparation for the trip is to ensure they have an **appropriate change of foot wear (E.g. trainers or wellies) and a coat**.

Please do not hesitate to contact any of the year 6 team if you need more information. Or google www.theblean.co.uk

Yours sincerely,

The Year 6 Team

Please complete and return to the office by Friday 12th October 2018

I/We give permission for _____ (pupil name) in Class _____
to take part in exploring Thornden Woods on Tuesday 16th October 2018

I do/not give permission for my child to travel in the school mini bus (please delete as appropriate)
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 contact number is _____

Name _____

Relationship to child _____

Signed _____

Date _____

