



Oakfield Junior School
Bell Lane
Fetcham
Leatherhead
Surrey
KT22 9ND
Telephone 01372 374781
e-mail Info@oakfield.surrey.sch.uk
website www.oakfieldjunior.com

22 March 2019

Year 3 Sleepover Friday 26th April 2019

Year 3 children are invited to return to school for a sleepover on Friday 26th April.

We would like the children to return to school at 5:30pm on the 26th. They will need to bring a sleeping bag, pillow, bed roll/mat, pyjamas and wash kit as well as any favourite cuddly toy.

If your child will need medication during the time they are at the sleepover please complete a Medication Request form, available from the office, and bring the form and medication with you on the Friday evening.

The children can look forward to an evening full of entertainment! They will have the opportunity to take part in some outdoor learning activities on the field or arts and crafts activities in the creative cabin, followed by supper and a movie. Then they will settle down to sleep in the Centre which is situated close to the toilets.

5 Staff members will be staying overnight for this event: Mrs Dyer, Mr James, Mrs King, Mrs Mare and Mrs Willemse. Additional staff members will be assisting with the evening activities.

On Saturday morning, if weather permits, after breakfast the children will have the opportunity to use the new Outdoor Learning Area. **Please collect your child from the Hall at 9:00am promptly on Saturday 27th.**

There will be a small charge of £5 per child to cover the cost of pizza on Friday night and breakfast on Saturday morning. If your child is unable to eat pizza please speak to your child's class teacher. Payment can be made on Wisepay, or with cash / cheque (payable to Oakfield Junior School). Please complete the attached form and return this to school, along with your payment by **Wednesday 3rd April 2019.**

Yours sincerely,

Mrs Buckler
Year 3 Group Leader

Year 3 Sleepover

I give permission for my child to attend the Year 3 sleepover on 26th April 2019

I have paid £5 by Wispay / cash / cheque / (please indicate)

Parent signature..... Child's name..... Class.....

On Saturday 27th April my child will be collected by:Tel.....

Please be aware of the following medical details/specific dietary requirements that may affect my child during this event:

.....
.....

