



A PLACE TO FLOURISH AND GROW

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Head Teacher: Mrs M Rumney

## 1B EDUCATIONAL VISIT – THE HIVE LIBRARY

20<sup>th</sup> April 2026

Dear Parents/Carers,

To enhance our love for reading, Year 1 will be attending an Educational Visit to the Hive Worcester Library on Monday 18<sup>th</sup> May 2026. We will be learning all about the library, how it works and different books we may find there. We will also be taking part in an exciting workshop led by one of the librarians.

The workshop is free for schools, so we are asking parents to cover the cost for the coach. The cost of the visit is £5.44 (to be paid via Arbor).

We will be leaving school at 9.20am and returning to school for 1pm. On the day, your child will need to be in full school uniform with a coat and sensible, school shoes. Please ensure your child has a drink and a snack and indicate on the attached form if you would like your child to be provided with a packed lunch.

You have already confirmed your photo permissions on Arbor however if you wish to change these, please log on and request the relevant changes.

If for any reason your child is unable to attend on the day, we will be unable to return payment.

Please make payment via Arbor, complete the permission slip attached and **return to your class teacher by Friday 8<sup>th</sup> May.**

Thank you for your continued support,

The Year 1 Team

**PLEASE RETAIN THIS LETTER FOR YOUR FUTURE REFERENCE**

**RE: 1B Educational Visit – The Hive  
Monday 18<sup>th</sup> May 2026**

**Payments to be made via Arbor and permission slips returned to the school office by  
Friday 8<sup>th</sup> May. Thank you.**

Pupil Name: \_\_\_\_\_ Class: \_\_\_\_\_

I would like my child to attend the trip to the Hive Library Worcester on Monday 18<sup>th</sup> May 2026

I have paid £5.44 via Arbor.

Lunch Preference (please tick one)

Cheese Sandwich

Ham Sandwich

I will provide my own packed lunch

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please give details of **TWO** contacts in case of emergency who are available on Monday 18<sup>th</sup> May.

<b>Contact 1 Name:</b>	
Mobile No:	
Landline No:	
Relationship to the child:	
<b>Contact 2 Name:</b>	
Mobile No:	
Landline No:	
Relationship to the child:	

Medical conditions/allergies/medication needed: