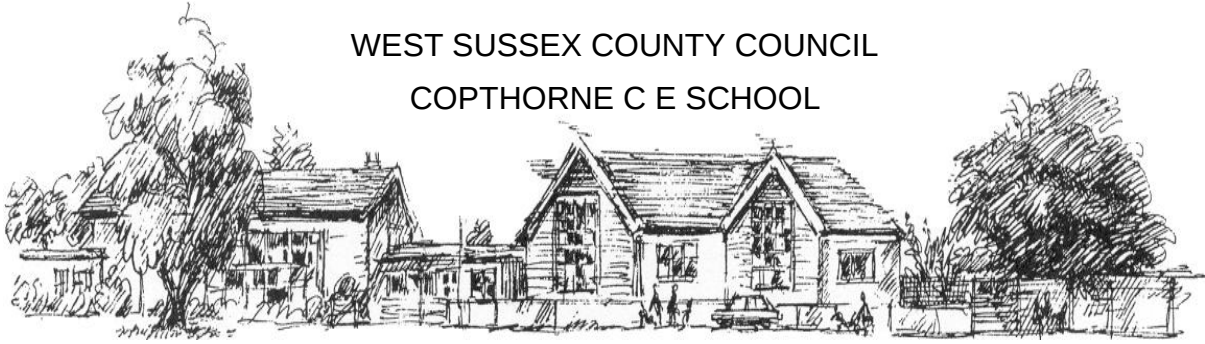


WEST SUSSEX COUNTY COUNCIL
COPTHORNE C E SCHOOL



CHURCH ROAD, COPTHORNE, WEST SUSSEX, RH10 3RD

Telephone: 01342 712372 – FAX: 01342 718513

E-mail: office@copthornejunior.co.uk

January 2026

YEAR 6 SPRING TERM LEARNING EXPERIENCES

Dear Parents/Carers,

We are writing to inform you of some of the exciting planned learning experiences for Year 6 pupils as part of our upcoming '*Exploring the Extreme*' topic.

ZooLab Visit – Tuesday 27th January 2026

In school, children will experience a ZooLab workshop with live animals led by an expert ZooLab presenter. This experience is linked to our Science topic on adaptation, evolution and Charles Darwin's discoveries. The children will get to meet some extraordinary animals, similar to the species Darwin himself saw and recorded.

Food Technology

Within DT, children will be tasting, designing and making a vegetable 'survival soup' suitable for Sir Ernest Shackleton and his fellow Antarctic explorers.

The total cost of these learning experiences will be £12.

Please can we ask that you return the attached permission form and the money for the experiences by Monday 26th January 2026.

Under current legislation, we are obliged to point out that the cost is a voluntary contribution. However, unless all parents who are willing to contribute do so, trips and events will not be able to take place. Limited financial assistance from the school may be available in certain cases, but please contact our headteacher in confidence as soon as possible, if you are unable to contribute the full cost so that arrangements can be made.

If you have any questions, please do not hesitate to contact your child's class teacher or the school office.

Yours sincerely,

Year 6 Team

YEAR 6 SPRING TERM LEARNING EXPERIENCES PERMISSION SLIP

Dear Year 6 teachers,

I give permission for _____ in _____ (class)

to take part in the **ZooLab workshop in school on Tuesday 27th January 2025 and the Food Technology soup tasting and cooking during Spring Term.**

☐ I enclose £12 to cover the cost of the SPRING TERM TRIP LEARNING EXPERIENCES (please make cheques payable to Copthorne Junior School).

☐ I have paid £12 via online banking. Please use your child's name as the reference.

Lloyds Bank – Copthorne CofE Junior School
Account Number: 02333669
Sort Code: 30-92-38

I give / do not give (please delete as appropriate) permission for my child to eat the produce made at school (all ingredients are nut free).

My child has the following allergies:

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

My son/daughter and I understand that high standards of behaviour will be required at all times during these sessions. I also understand that while the school staff in charge of the party will take full reasonable care of the pupils, unless they are negligent, they cannot be held responsible for any loss, damage or injury suffered by my son/daughter arising during or out of the learning experiences.

Signed _____ Date _____