

The Warriner School

Responsible - Respectful – Ready

A member of The Warriner Multi
Academy Trust

Executive Headteacher: Dr Annabel Kay



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Our ref: GDA/JBA/Year9 Enrichment

7th September 2021

Dear Parent, Guardian, or Carer,

Year 9 - National Space Centre Trip - Tuesday 5th October and Wednesday 6th October 2021

As part of our Science Enrichment Programme to broaden students' scientific horizons, we are planning to visit the National Space Centre in Leicester on Tuesday 5th October or Wednesday 6th October 2021 (**West on 5th and East on 6th**).

At this event students will have the chance to:

- Explore ideas about space travel
- Find out about the chemistry of launching a rocket into space
- Learn about what it takes to be an astronaut
- Experience a planetarium

The presenters at the Space Centre have been carefully chosen for their ability to communicate with students in a direct and engaging way. The day will be fast-moving, exciting, and thought-provoking and will give students the chance to discuss issues with the presenters.

The cost of the trip is £25.23; however, you are **NOT** required to make any payment as this trip will be covered by the Enrichment Day money paid when your child was in Year 7, but not all used due to Covid. You must complete the Consent Form at the bottom of this letter and **return it to the Finance Post Box by Monday 20th September**. Students will need to wear school uniform. They should bring enough food and water with them for the day. As representatives of the school, exemplary behaviour is expected at all times.

We plan to leave school at 08.30 am and **return to school at 4.00 pm, so students will need collecting from school** at this time. Any queries, please do not hesitate to contact me.

Kind regards

Dr Grant Dawber
Deputy Head of Science

RETURN TO FINANCE POST BOX BY MONDAY 20TH SEPTEMBER 2021

I give permission for (students full name) _____ to attend the National Space Centre Trip on Tues 5th (West) / Weds 6th (East) October from 8.30am to 4.00pm

Emergency contact: Name _____ Number: _____

Signed: _____ (Parent/Guardian)



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