



LEAGRAVE PRIMARY SCHOOL



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Headteacher: Mrs E Gillespie
Deputy Headteacher: Mrs D Bastin

'STRIVING FOR EXCELLENCE, LEARNING FOR LIFE'

Friday 17th April 2026

Year 6 Post SATs Treat: Go Bowling Dunstable – Friday 15th May 2026

Dear Parents/Carers,

To celebrate the incredible hard work and dedication our Year 6 pupils have shown during their SATs preparation, we are delighted to invite them to a celebratory bowling session at Go Bowling, Dunstable.

As a special treat from the school, there will be no cost for this trip.

We will leave from Legrave Primary School by coach at approximately 11:30am and return at 1:15pm. **All children will need to be collected from the playground.** Children should come to school at the normal time and they will eat their packed lunch at school before we depart.

Please note that children who receive a hot dinner will be given a packed lunch on this occasion, due to the earlier lunch time. This will include a roll, crisps, healthy snack, sweet treat and piece of fruit. Please tick below whether you would like your child to bring their own packed lunch or whether you would like the school to provide one.

Children will need to bring the following items:

- School uniform
- Sensible walking shoes
- Waterproof coat/sun hat where applicable
- They will **not need** any extra spending money

Please complete and return the slip below to your child's class teacher no later than Friday 8th May 2026.

Yours sincerely,

Miss Conway, Miss Monaghan and Miss Brooks
(Year 6 Class Teachers)



Year 6 Post SATs Treat: Go Bowling Dunstable – Friday 15th May 2026 – Reply Slip

Child's Name:

Class:

My child has permission to go on the bowling trip on Friday 15th May.

My child **does not** have permission to go on the bowling trip on Friday 15th May.

Lunch options:

I have paid for a School Lunch via Scopay and would like the school kitchen to provide a packed lunch.

My child is entitled to Free School Meals and would like the school kitchen to provide a packed lunch.

I will be providing my child with a packed lunch.

My child has the following medical needs/medication:

.....
.....

Emergency Contact Number:

.....
.....

Signed:Parent /Carer

Date:

***When signing the consent form, it is important you understand:**

- That whilst the supervisory adults in charge of the group will take all reasonable care of the young person, neither they, nor the local authority, can necessarily be held liable in respect of loss of or damage to the property of or injury suffered by the young person arising out of the educational visit, unless such loss, damage or injury results from the negligence of Luton Borough Council, it's employees or official volunteers.
- The extent and limitations of the insurance cover provided is available on request from the school office.
- That in the absence of a parent, the school will act in loco parentis and ensure that your child receives medication as instructed and any emergency dental, medical or surgical treatment including anaesthetic or blood transfusion, as considered necessary by the medial authorities present. In all cases, every effort will be made to contact parents in the first instance so long as time allows.