



BENYON PRIMARY SCHOOL



Tyssen Place, West Road, South Ockendon, Essex, RM15 6PG

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<https://www.benyonprimaryschool.org.uk/>

Dear Parents and Carers,

13th October 2023

The Parent Action Group will be holding a Spooktacular Disco on Friday 3rd November 2023. Spooky themed or party clothes can be worn.

The cost will be £3.50 per child which will include a drink and a snack. Please sign the permission slip below clearly indicating any allergies your child may have. Please ensure that the permission slip is returned to your child's class teacher and payment is made on the Arbor App under "school shop". Please also ensure that any siblings each have an individual permission slip

Disco Times:

Reception, Year 1 and Year 2 : 3:30pm-4:30pm

Years 3, 4, 5 & 6 : 4:45pm-5:45pm

Reception and KS1 children with signed permission forms will be taken directly from their classroom into the hall after school.

Admission without a ticket will not be permitted on the night of the event due to ensuring adequate supervision and snack preparation. **All reply slips must be handed to the class teacher by Friday 20th October and payment must be made by 3.30pm on this day. If we don't get both the slip and payment by the deadline, your child will be unable to attend.** Any slips handed in after this date will not be accepted.

We reserve the right to telephone and ask you to collect your child should they become unsettled or disrupt the event for other children.

Children are to be collected promptly at the time above. Ensuring that all the children are handed to their parents/carers safely takes some time, so your patience will be appreciated.

Yours sincerely

The PAGS

Spooktacular Disco – Please return to Class Teacher by Friday 20th October

I agree for my child.....in year
to attend the Spooktacular Disco on Friday 3rd November 2023

My child is allergic to or not permitted to have:

I agree to collect my child promptly at 4:30 or 5:45pm. Failure to do this may lead to my child not being able to attend voluntary events, after school, in the future.

Name of person collecting the above child:

Contact Number:

I give permission for my child to walk home alone.

Signed:

Date:

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Staff Engagement Award

