**[Your School Name]**
[School Address]
[City, Postcode]
[Phone Number]
[Email Address]
[Date]

Dear Parents/Guardians,

We are excited to inform you that our Year 6 residential trip to the **Water Park Adventure Centre** is fast approaching! This will be a fantastic opportunity for students to engage in outdoor activities, develop teamwork skills, gain confidence, form new friendships and create lasting memories. Please find below some important information regarding the trip.

**Trip Details**

* **Destination**: Water Park Adventure Centre
* **Dates**: [Insert dates of the trip]
* **Departure from school**: [Insert time]
* **Return to school**: [Insert time]

**Equipment Required**

All specialist equipment is provided by Water Park, however, below is a recommended equipment list:

* 5 sets of warm clothes
* Hat & gloves
* Sturdy footwear (e.g., trainers or boots)
* A pair of wellington boots for outdoor activities (Water Park can provide)
* Pyjamas and indoor clothing
* Toiletries (toothbrush, toothpaste, etc.)
* A towel
* Sun protection (sun cream, hat)
* A refillable water bottle
* A small backpack for personal items
* Optional: Camera or disposable camera (to capture memories!)
* £5 for tuck/souvenir (optional)

Please label all belongings with your child’s name to avoid mix-ups. We also recommend visitors pack their own suitcase, so they know what they have with them.

**Payment Information**

We have been fortunate the Eric Wright Charitable Trust has agreed to contribute [£5000] towards the cost of this trip. The remaining cost of the residential therefore is [Insert total cost]. To make this more manageable, we will be offering **weekly payments**. The payment schedule is as follows:

* **First Payment Due**: [Insert date]
* **Subsequent Weekly Payments**: [Insert weekly amount]
* The final payment is due by [Insert final payment due date].

Payments can be made via [insert payment method, e.g., school’s online payment system, cheque, etc.]. If you require any assistance with payments or need to discuss a payment plan, please do not hesitate to contact [insert contact details for finance office or relevant person].

**Important Reminders**

* Please ensure that all payments are made on time to secure your child's place on the trip.
* A detailed medical and consent form will be sent to you shortly for completion.
* If your child has any specific dietary or medical needs, please inform us as soon as possible so that we can make appropriate arrangements.

We look forward to an exciting and enriching experience for your child at the Water Park Adventure Centre. Should you have any further questions or concerns, please feel free to contact me at [insert your contact details].

Thank you for your continued support.

Yours sincerely,
[Your Name]
[Your Role]
[School Name]