



Navenby Church of England Primary School

East Road, Navenby, Lincoln. LN5 0EP. Tel: 01522 810628
Email: enquiries@navenby.lincs.sch.uk
School website: www.navenbyschool.com
Headteacher: Mr C Elliott NPQH BA (Hons) QTS



10th March 2026

Dear Parents

We have been invited to take part in the Sir William Robertson Academy Primary Maths Challenge and your child has been selected as one of four to represent our school.

It is taking place at SWRA on **Thursday 19th March** 2026 from 10.30am until 2.30pm. The competition combines mathematical, communication and teamwork skills and offers pupils the opportunity to express and develop their enjoyment of the subject.

There will be approximately 15 schools from Lincolnshire and Nottinghamshire taking part. You will need to provide your child with a packed lunch and drinks; they will receive homemade cookies as a break-time snack. All stationery is provided so the children do not need to take anything with them to access the competition. There will be trophies for the top three teams and certificates for everyone taking part.

I will be with the children through the day so I will be happy to transport children to SWRA but our policy only allows me to have three children in the back seat. Therefore, I would need at least one parent to assist. Ideally, if everyone could take and collect their own child that would be best but I appreciate this is not always possible. We need to arrive by 10.30am so can you please collect your child from school at 10.10am and come to SWRA at 2.30pm to collect.

SWRA would like to take some photographs on the day and so please can you indicate on the return slip below if you give your consent for this.

If there is anything else you wish to know please contact me.

Yours sincerely,

Mr C Elliott

I _____ (name) give permission for _____ (child's name) to take part in the SWRA Maths Competition on Thursday 19th March 2026.

Arrangements for getting my child to and from SWRA are:

I give do not give permission for my child to be photographed **tick as appropriate*

Signed: _____ (Parent/Carer) Emergency contact number _____

