



Our Ref: STEPs  
 Contact: Karen Roberts/Amanda Pugh  
 Wednesday 22<sup>nd</sup> April 2025

Email: Karen.roberts@bcpcouncil.gov.uk  
 Amanda.pugh@bcpcouncil.gov.uk

Dear Year 1 Parents/Carers,

**Re: Safe Training Education Programme – STEPs Road Safety Training**

Your child’s school is starting a Safe Training Education Programme provided by Bournemouth, Christchurch and Poole Council and your child is being offered a place on this scheme.

**STEPS Road Safety** involves training children at the roadside in small groups under the supervision of adults. They will be well supervised, with a ratio of one adult to a maximum of two children. All children will wear high visibility reflective tabards whilst being trained. Children will learn how to cross the road safely and think about the dangers of the road.

For your child to be able to take part you must sign the form below and return it to school by Thursday 1<sup>st</sup> May 2025.  
**Please note that we cannot train your child unless you return this form.**

This training is really important because it is preparing children for future safety on the road.

**We NEED PARENT HELPERS to be able to do Road Safety Training. If you are able to spare a couple of hours for two mornings we would be very grateful.**

Dates of the sessions are: **Tuesdays 13<sup>th</sup> May + 20<sup>th</sup> May at 1:30pm.**

**There is also a parent meeting for those who can help, to explain how you will support the children, on Tuesday 6<sup>th</sup> May at 2:30pm.** Please come along to the meeting to find out more about helping.

**Sadly, without enough helpers we will not be able to do the Road Safety Training with your children.**

Yours sincerely

Karen Roberts and Amanda Pugh  
 Transport and Engineering

Reply slip - Year 1 Road Safety Training 2025

**I give permission for** \_\_\_\_\_ (child’s name) class \_\_\_\_\_ to take part in the Safe Training Education Programme. I understand that my child will be properly supervised.

Signed \_\_\_\_\_ Parent/Guardian

**I am able to help during these Road Safety Sessions (dates above)**      Yes       No

Your name is: \_\_\_\_\_ (name)

Tel: \_\_\_\_\_