Headteacher

John Galvin

Petworth CofE Primary School

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12 May 2016



Dear Parents/Carers,

Rother Valley Football Tournament

Your child has been selected to take part in a Rother Valley Football Tournament at Stedham Recreation Ground on the morning of Thursday May 26th. We shall be travelling in staff cars, leaving school at 8.30am promptly and your child will need to be in school by 8.20am at the latest. We shall arrive back at school in time for lunch.

Your child will need to bring:

- a healthy high carb snack/piece of fruit for mid-morning
- two bottles of water for during the day
- football kit will be supplied by the school
- trainers or football boots
- appropriate clothing for the day (either wet weather gear or sun hat and sunscreen)
- Shin pads are essential as children will be wearing studs.

We are looking forward to exciting morning of sport!

I would be pleased if you could sign and return the attached Consent Form as soon as possible.

Thank you.

Yours sincerely

Jo Duffy PE Co-ordinator

PETWORTH CE PRIMARY SCHOOL CONSENT FORM FOR FOOTBALL TOUNRAMENT AT STEDHAM RECREATION GROUND FOR KS2 ON THURSDAY 26th MAY 2016

I wish my son	<u> </u>	(name)
	-	above mentioned school visit and having read the information in any or all of the activities mentioned.
		erstands that it is important for his/her safety and for the safety y instructions given by the staff in charge are obeyed.
care of the ch	nildren, unless they	I staff and helpers in charge of the party will take all reasonable are negligent they cannot be held responsible for any loss, son/daughter arising during or out of the journey.
(Note: A Scho Sussex County	•	ce Policy of Chartis Insurance UK Ltd is available through West
Please delete	and complete the f	ollowing as is appropriate.
My child has:	the following illn	or physical disability * ess or physical disability * which does not apply
which necessit	tates the following r	nedical treatment:
	y emergency medic nat my child is in so	al treatment necessary during the course of the event. chool by 8.20am.
Signed		Parent/Guardian
Address	НОМЕ	WORK
Tel. No.	HOME	WORK
If not available	e at the above, pleas	e state an alternative contact:
Name		Tel. No