

Headteacher

John Galvin

Petworth C of E Primary School

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22 November 2017

Dear Parents/Carers,

Pantomime at the Capitol Theatre, Horsham on Thursday 14th December 2017

We are planning to take the children, teachers and teaching assistants of Key Stage 2 to see '**Jack and the Beanstalk**', at the **Capitol Theatre in Horsham, in the afternoon of Thursday 14th December**. This year the PPSA have very kindly donated a substantial amount towards the cost of the theatre ticket and transport to Horsham. **Please could we ask for a voluntary contribution of £4 per child, which we would be pleased to receive as soon as possible. Please complete and return the attached slip.**

School uniform must be worn. The children will have an early lunch, after which we will travel by coach to Horsham leaving school at approximately 11.50am. We would be grateful if you could please ensure that your child has a packed lunch for this day, rather than ordering a hot meal, due to the timing of lunch. We shall arrive **back at school at approximately 4.40pm.**

I would be pleased if you could sign and return the attached consent form as soon as possible with your contribution.

Yours sincerely

John Galvin
Headteacher

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...
KS2 Jack and the Beanstalk Pantomime Trip on Thursday 14th December 2017

Name of child.....Class

I enclose a voluntary contribution of £4.

I will collect my child from school on the return from the pantomime at 4.40pm.

Signed (parent/carers)..... Date

PETWORTH C OF E PRIMARY SCHOOL

CONSENT FORM FOR 'JACK AND THE BEANSTALK' PANTOMINE AT THE CAPITOL THEATRE, HORSHAM ON THURSDAY 14 DECEMBER 2017

I wish my son/daughter _____ (name)

to be allowed to take part in the above mentioned school visit and having read the information letter, agree to him/her taking part in any or all of the activities mentioned.

I have ensured that my child understands that it is important for his/her safety and for the safety of the group that any rules and any instructions given by the staff in charge are obeyed.

I understand that, while the school staff and helpers in charge of the party will take all reasonable care of the children, unless they are negligent they cannot be held responsible for any loss, damage or injury suffered by my son/daughter arising during or out of the journey.

(Note: A School Journey Insurance Policy of Chartis Insurance UK Ltd is available through West Sussex County Council)

Please delete and complete the following as is appropriate.

My child has: no illness, allergy or physical disability *
the following illness or physical disability *
• Cross out which does not apply

which necessitates the following medical treatment: _____

I consent to any emergency medical treatment necessary during the course of the event.

Signed _____ **Parent/Guardian**

Address HOME WORK

Tel. No. HOME WORK

If not available at the above, please state an alternative contact:

Name _____ Tel. No. _____