#### Headteacher

John Galvin

#### **Petworth C of E Primary School**

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14<sup>th</sup> January 2019

Dear Parents/Carers,

# **The Young Voices 2019**

The big day is fast approaching the 02 choir will travel up to London in the morning on Monday the 28<sup>th</sup> January.

Please take a look at the parents' section on the Young Voices website <a href="https://www.youngvoices.co.uk">www.youngvoices.co.uk</a> as it answers a lot of the questions you may have about the concertor venue.

Please could I ask you to complete and return the attached consent and medical form to the office by **Monday 21**<sup>st</sup> **January.** 

# What you need to know about the Young Voices

Date: Monday 28<sup>th</sup> January 2019

Where: The 02 Arena, London

**What time:** The coach will be leaving school at 10am and returning to school between 11.30pm and 12am.

**Rehearsal**: Children will be rehearsing from 2.15pm and they will have a break for tea at 5pm.

**Arrival time for parents at the 02**: We have been asked by the 02 to ask parents who have ordered and paid for adult tickets to arrive as near to 5.30pm as possible due to the number of parents that will be attending the performance and security checks.

# Concert starts at 7pm

### Concert finishes at 9pm

#### School coach departs at 9.30pm

**Returning to school:** If you are coming to the concert and you are not travelling with the children on the coach, you can take your child home with you and you can collect your child from the school coach in the coach park. We will text you with the coach's location when we arrive. We will send a text message when we depart the arena and approximately 30 minutes away



from school so that you are aware of the time to expect us back at school. Please can I ask those parents who are travelling on the school coach to return to the coach as soon as possible.

**The following day**: On Tuesday 29<sup>th</sup> January, the children only in the 02 Choir (not siblings) can come into school at normal time or at 10.30am ready to start lessons at 10.40am.

**Clothes**: the children will need to wear their Young Voices T-shirt with black trousers/jeans/leggings, school logo blue jumpers/cardigans and comfortable shoes/trainers.

**Food and drink**: children will need to bring a packed lunch, tea, healthy snack and plenty of drinks to keep them hydrated in a small rucksack.

**Tickets**: we will send a text message or e-mail home shortly to the parents who paid for adult tickets. We have been informed by the 02 that there are no more tickets available. However we can add you name onto a waiting list and will contact you should a ticket become available.

Please pop into the office if you have any further questions or queries regarding this trip.

Thank you.

Yours sincerely

Hilary Wilson

Music Co-ordinator
Young Voices at the 02 Arena on Monday 28 <sup>th</sup> January 2019
Name of child
*I (name)will be attending the Young Voices and would like to collect my child from the coach in the coach park and take them home with me.
*My child will be travelling home on the coach and I will collect them from school at approximately $11.30  \text{pm}/12  \text{am}$ .
*My child will be collected from school by (name)at approximately 11.30pm/12am.  *please delete as appropriate

Signed......date.....date.....

# PETWORTH CofE PRIMARY SCHOOL CONSENT FORM FOR THE YOUNG VOICES AT THE 02 ARENA, LONDON ON MONDAY 28<sup>TH</sup> JANUARY 2019

	to take part in the	above mentioned schoot in any or all of the acti	(nar	
I have ensure	d that my child und	lerstands that it is impor	ortant for his/her safety and for the staff in charge are obeyed.	he safety
care of the c	hildren, unless the	y are negligent they ca	harge of the party will take all recannot be held responsible for a	
(Note: A Scho Sussex Count	<u> </u>	ace Policy of Chartis Inst	surance UK Ltd is available throu	ıgh West
Please delete	and complete the	following as is appropr	riate.	
My child has:	the following illr	y or physical disability ness or physical disability at which does not apply	ty *	
which necessi	itates the following	medical treatment:		
I consent to an	ny emergency medi	cal treatment necessary	during the course of the event.	
Signed			Parent/Guardi	an
Address	HOME		WORK	
Tel. No.	НОМЕ		WORK	
If not availabl	le at the above, plea	se state an alternative co	ontact:	
Name	Tel. No			