**Headteacher** John Galvin

## **Petworth CofE Primary School**

South Grove, Petworth, West Sussex, GU28 0EE

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13<sup>th</sup> May 2021

Dear Parents/Carers,

## Year 6 Football Tournament at The Weald School on Thursday 27th May 2021

Finally, we have been given permission to participate in competitive sport against another school. We know that children have been playing competitively outside of school for a while, but now we have the opportunity to participate in a football tournament at The Weald School. I fully understand that you may have reservations about allowing your child to participate in this tournament, so if you do not want your child to take park please let me know. Your child has been selected to take part in a Football Tournament after school (from 4 to 5.30pm) on **Thursday 27<sup>th</sup> May 2021.** 

The squad selection for this tournament is:-

Louis Dempsey (goalkeeper) Marley Rampton © Harry Ralph Ollie Knight Leo Velletrani Charlie Torode

Your child will need to bring:

Thomas Bosman

- Football kit will be supplied by the school
- Trainers as we are playing on AstroTurf (not 3G)
- A bottle of water
- Shin pads are essential

We will be travelling to and from the Weald on the school minibus, but please can you collect them from The Weald School at 5.30pm.

Please complete the attached consent form and return it to the office by **Wednesday 19<sup>th</sup> May 2021** if you allow your child to participate. If we do not received your permission, I will offer this opportunity to another child.

Thank you.

Yours sincerely,

John Galvin Headteacher



## PETWORTH COFE PRIMARY SCHOOL YEAR 6 FOOTBALL TOURNAMENT AT THE WEALD SCHOOL ON THURSDAY 27<sup>TH</sup>MAY 2021

to be allowed				(name) aving read the information ned.
		lerstands that it is impoinstructions given by t		safety and for the safety of e are obeyed.
care of the chil	dren, unless they		ot be held respo	arty will take all reasonable nsible for any loss, damage ley.
(Note: A Scho Sussex County	•	nce Policy of Chartis In	nsurance UK Ltd	d is available through West
I give permissi	on for my child to	travel on the school m	ninibus.	
Please delete a	and complete the	following as is appro	priate.	
My child has:	the following ill	gy or physical disability ness or physical disabi ut which does not apply	lity *	
which necessit	ates the following	medical treatment:		
I consent to an	y emergency med	ical treatment necessar	y during the cou	arse of the event.
Signed				Parent/Guardian
Address	HOME		WORK	
Tel. No.	НОМЕ		WORK	
If not available	e at the above, plea	ase state an alternative	contact:	
Name			Tel No	