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Headteacher: Ms J Heffernan Follow us on Twitter @CardinalPoleRC

6<sup>th</sup> December 2017

Dear Parent/Carer

## TOWER OF LONDON TRIP – 14<sup>TH</sup> DECEMBER 2017

Your child has been selected to attend a visit to the Tower of London. Over the last two weeks all students in Year 8 were challenged to reduce their behaviour points during the "Tower Challenge". We are delighted to inform you that your child has behaved superbly during this period. As such, they have won a reward trip to visit the Tower of London on Thursday 14<sup>th</sup> December 2017. The Tower of London is a fascinating reminder of Britain's history. The site was a medieval zoo housing Barbary lions, tigers and other beasts as far back as 1280AD, Elizabeth I was imprisoned here before becoming Queen, and other captives were gruesomely executed to maintain the power of the state.

Details of the trip:	
Venue:	Tower of London St Katharine's & Wapping, EC3N 4AB
Date(s):	14 <sup>th</sup> December 2017
Time:	9am leave, Return to school at 3.30pm
Travel arrangements:	Bus
Cost:	£3.00
Meals:	Packed lunch. Students on Free School Meals will be provided for.
Special Clothing:	Full School Uniform including school coat

Please be assured that the students will be accompanied to and from the venue, as well as being fully supervised for the entire trip. If there are any concerns regarding the trip, please feel free to contact me on the above number.

Please complete the attached reply slip below and return it to me by Tuesday 12<sup>th</sup> December 2017. **Please Note: No child** will be allowed to attend the trip without a completed reply slip. Please also note that only students with good behaviour will be permitted to attend a trip.

Yours faithfully

Mr A Parker Head of Year 8

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## **REPLY SLIP: TOWER OF LONDON - PLEASE RETURN TO MR PARKER BY 12<sup>TH</sup> DECEMBER 2017**

## I give permission for my child to attend the visit to the Tower of London

Student Name: (please print)	Form:
Medical Condition/Allergies:	
Emergency Contact Name and Relationship to Child:	
Emergency Contact Number:	
Please tick <u>one</u> of the boxes below My child will be collected from school My child will make their own way home	
Signed:	te:

