



15th May 2015

Dear Parent/Carers,

English Schools Cup Round 1– Tuesday 19th May 2015

Your child has been selected to represent the School in the English Schools Cup at Mile End Stadium. Details are as follows:

- Competition:** English Schools Cup- Round 1
- Date:** Tuesday 19th May 2015
- Location:** Mile End Stadium
- Time:** Meet at the canteen at 8.00am promptly
- Finish time:** Approximately 4.00pm

Travel Arrangements: Pupils will take public transport to and from the venue with teachers in charge

Please ensure your child brings with them:

- Full PE kit (including white socks and trainers)
- Packed lunch including water - those on Free School Meals will be provided with a packed lunch.
- Inhaler if Asthmatic
- Oyster card

If your child has any other medical conditions which the school should be aware of, please phone the school on 0208 985 5150.

If you would like your child to take part, please sign and return the permission slip below.

Yours sincerely,

Miss Gare
PE Teacher

Reply Slip –English Schools Cup–Tuesday 19th May 2015

(Please return to Miss Gare)

I, the parent/carer of _____ in form _____ give my child permission to attend the English Schools Cup Tuesday 19th May.

Name of Parent/Carer: _____

Signed: _____

Date: _____