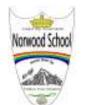
Email: <u>office@norwood.peterborough.sch.uk</u> Website: <u>www.norwood-school.co.uk</u>

Head Teacher: Mrs D Reynolds - BSc Hons QTS NPQH

Telephone: 01733 574717 Fax: 01733 703250



Norwood Primary School Gunthorpe Road Gunthorpe Peterborough PE4 7DZ

Aím Hígh

Never Give Up

Follow Your Dream

Lead By Example

Thursday 7<sup>th</sup> May 2015

Dear Parents/Carers

Norwood School have entered the Year 5/6 'Youth Dreams Project Football Cup 2015' tournament on **Thursday 21<sup>st</sup> May 2015** at The Grange, Netherton and your child has been chosen to represent Norwood Primary School. They will be playing on the 3G pitch and will need astro turf boots/trainers.

The tournament will be held during the school day between 11.45am and 4.30pm. We will be travelling together on a coach and will leave school at approximately 11.20am. Your child will need to bring a packed lunch and a water bottle.

This is an extremely exciting opportunity for our football team with many awards, trophies and medals to be won. It would be wonderful if any parents/carers or family members are able to come and support the team and the clubhouse has excellent facilities which will be selling refreshments.

## Children will need to be collected from The Grange, Netherton.

Due to this being a Knockout tournament – the fixture times do vary. Although the final will not finish until nearly 4:30pm, if our team is to get knocked out before this the players can leave with the adult collecting them. Therefore please can your child be collected between 3.30pm and 4.00pm.

Could you please fill in the permission slip below and return it by email by **Monday 18<sup>th</sup> May 2015**.

Yours sincerely

Mr Robertson Year 6 Teacher Mr Johnson Team Manager

Mrs D Reynolds Head Teacher

## Football Cup Youth Dreams Project

Thursday 21<sup>st</sup> May 2015

I give permission for my child\_\_\_\_\_\_ to take part in the World Cup Youth Dreams Project Festival at the Grange, Netherton.

I confirm my child will be collected from the Grange between 3.30pm and 4.00pm.

Please write any medical conditions have your child has: \_\_\_\_\_\_

Name of Parent/Carer: \_\_\_\_\_

Date: \_\_\_









