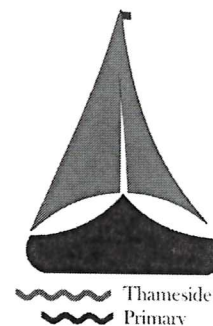


Thameside Primary School
Manor Road
Grays
Essex
RM17 6EF
Tel: 01375 372188
Email: office.tps@stcleres.coop
Website: www.thamesideprimaryschool.com



Our strength is our difference

Head Teacher: Mr J Fish

15th January 2018

Dear Parents/Carers,

Year 5 and 6 B Team Football v Dilkes.

The next B team league match is this **Thursday 18th January** and will be played at **away**. The match should be finished between 4.15 and 4.30pm. Please ensure that if your child is being collected that you are here at that time.

Pupils will need black football socks and black shorts as well as football boots. The Football Association stresses that all players must have **shin pads** which are worn underneath their long socks. Unfortunately players will not be permitted to play unless they have these.

If you wish your son to play then please complete the consent slip below.

Any problems please do not hesitate to contact me.

Yours sincerely

Mr A S Bennett
Head of PE



St Clare's Co-operative Academy Trust is registered at
Companies House, Cardiff
Registered Company No. 7703865
www.stcleres.coop

I would like my son to be included in the football match on Thursday 18th January. I approve such medical treatment for my child as deemed necessary in an emergency or on the advice of a qualified medical practitioner, if I cannot reasonably be contacted in time. (If for religious reasons you are unable to sign this authorisation please contact me as soon as possible so an alternative authorisation slip may be provided.

I have written overleaf any medical conditions from which my child is suffering, together with details of the treatment required.

Signed;parent/guardian

Name of Student:.....tutor group:.....

Telephone number:.....

I can help with transport: Yes/NoN/A.....

Form of Consent

Activity:	Football Match v Dilkes		
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Dates:	18 th January	Child's Name:	
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Medical conditions/history and other relevant information on the student (continue on separate sheet if necessary)

Signed: (Parent/Guardian)		Date	
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Name: (block capitals) (Parent/Guardian)	
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Address & phone number (please include mobiles)	
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Alternative Emergency Contacts:	Name	Contact Number	Alternative Number
(to be used during the visit in an emergency only)			