



WESTCLIFF HIGH SCHOOL FOR GIRLS

An Academy Grammar School
Headteacher: Dr Paul Hayman BSc



May 2017

Kenilworth Gardens, Westcliff-on-Sea, Essex, SS0 0BS



Telephone: 01702 476026
Website: www.whsg.info

Fax: 01702 471328
email: generalenquiries@whsg.info

Dear Parent/Carer



As inspiration for GCSE Music, your daughter is invited to attend a trip to see **Afro Celt Sound System** at the **The Barbican Hall** on **Tuesday 21st November 2017**. Your daughter will have the opportunity to purchase dinner from one of a selection of restaurants in the vicinity of the area of the theatre but should ensure she brings any other food and water that she might require.

We do not require your daughter to wear school uniform, however she must be appropriately dressed for the occasion. Any inappropriate clothes will result in the refusal of your daughter attending the trip.



This is an extra-curricular trip and should you wish your daughter to attend, a payment of **£50.00** is required which covers the cost of the theatre ticket, transport, administration and insurance. We will be travelling by coach, leaving school at **3.45pm** and arriving back at approximately **11.30pm**.



Please pay for this trip using ParentPay. If you have any problems making payment please telephone Mrs Hine on 01702 476026 to make payment over the telephone. **Payment is required no later than Friday 9th June 2017**. There are a limited number of tickets available on a first-come, first-served basis.



Please also return the permission slip below; if it is not received then your daughter will be unable to attend the trip.

We look forward to an excellent evening at the theatre.

Yours sincerely

R. Morrison

Miss R Morrison and Mr S Clarke



Return to box outside school office



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I give permission for my daughter _____ of Form _____ to attend the trip to see **Afro Celt Sound System** at the **Barbican Hall** on **21st November 2017**



I will collect my daughter on her return to WHSG



My daughter will be collected by another parent on her return to WHSG.



Other arrangements – please specify

Signed: _____
(Parent/Carer)

Date: _____



SEAT

