



Headteacher: Mr. M. Smallwood

Registered Office:

Marsland Road, Sale,

Cheshire, M33 3NH

Tel: 0161 973 3217

Fax: 0161 976 4904

Email: [office@salegrammar.co.uk](mailto:office@salegrammar.co.uk)

Website: [www.salegrammar.co.uk](http://www.salegrammar.co.uk)

Company Number: 07538380

VAT Number: 120951441

21<sup>st</sup> November 2011

Dear Parents/Carer

I am pleased to inform you that your son has been selected to represent the Year 8 boy's rugby team in the North West State Schools rugby competition, on **Friday 25th November 2011**.

The competition will take place at Preston Grasshoppers Rugby Club and the games are scheduled to start at 1.00pm. We will be leaving school at approximately 12.00pm so therefore students will need to bring a packed lunch to school that day. **The squad will be transported to and from Preston Grasshoppers by coach and will return to school at 5.00pm.**

Pupils will need to bring with them their outdoor PE kit, football/rugby boots and something warm to put on in between matches.

Parents are more than welcome to come along and support. If you give permission for your son to take part in the competition, please complete the attached reply slip and return it to me as soon as possible.

Yours sincerely

**Mr Crampton**  
Sale Grammar School

**Mrs A McPartland**  
Business Manager

**REPLY SLIP:- PLEASE RETURN TO Mr. S.M. Crampton.**

North West State Schools Rugby competition – Preston Grasshoppers Rugby Club, on **Friday 25th November 2011**

**STUDENT NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

I/We give permission for our son/daughter to participate in the above trip/activity.

**EMERGENCY CONTACT DETAILS**

Please provide contact details below:

CONTACT NAME: \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_

CONTACT NUMBER/S: \_\_\_\_\_

**MEDICAL INFORMATION**

Please detail any medical conditions/medication that your child has/is taking.

\_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_ Date: \_\_\_\_\_  
(Parent/Carer)