

JB

18<sup>th</sup> November 2019

**Bradford City V Salford City – Saturday 21<sup>st</sup> December 2019**

Dear Parents and Carers,

We are offering tickets to watch Bradford City v Salford City on Saturday 21<sup>st</sup> December 2019 at the Utilita Energy Stadium (Bradford). The game kicks off at 3pm and tickets are £2.50 per ticket per person. There are no maximum number of tickets you can purchase and these will be handed out to children once we have them and the money has been paid through ParentPay. The deadline for payment is Friday 6<sup>th</sup> December 2019.

As parents are expected to accompany their children then they will be fully responsible for them at all times.

If your child would like to attend but cannot get to the Utilita Energy Stadium (Bradford) than Mr Bradley will be able to take just **four** children. This will be on a **first come, first serve basis** through either **a phone call to the office or visit to the office**. In this case, we will be departing school at 1:30pm with a return between 5:45 & 6:00pm and Mr Bradley must have any medication that your child may need and the signed slip below. Children may bring a snack to enjoy at half time. If your child requires any medication than you must make sure they have it with them or they will be unable to attend.

Many thanks.

Mr Bradley

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I give permission for my child..... in .....to watch Bradford City V Salford City on Saturday 21<sup>st</sup> December 2019 and be transported to the Utilita Energy Stadium (Bradford) by car.

Please indicate any pre-existing medical conditions your child suffers from e.g.: Asthma, Diabetes etc.....

I confirm that I will make arrangements to collect my child from Oakworth Primary by 6:00 pm.

In the unlikely event of a medical emergency, I give school staff permission to authorise any medical treatment that they deem necessary and my contact number during the event is.....

I understand that I am entirely responsible for the arrangements made regarding his/her return home from the event and that they have with them any medication necessary for a pre-existing condition.

Signed ..... (Parent / Carer)