



Mary Webb School & Science College, Pontesbury, Shrewsbury, Shropshire SY5 0TG

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30<sup>th</sup> October, 2017

Dear Parents

### Year 9 WhizzBang Theatre Pantomime – Monday 4<sup>th</sup> December, 2017

As part of their study of Pantomime in Drama, our Year 9 students have the opportunity to see a live performance by the WhizzBang Theatre Group who are visiting school on Monday 4<sup>th</sup> December, 2017.

The cost of this event is £2.00 per student. Students who receive free school meals will be supported through funds allocated to the school. Please could you complete the reply slip below enclosing your payment by Monday 6<sup>th</sup> November, 2017.

There is an additional date to make note of regarding your son/daughter. All Year 9 pupils are performing in the Christmas Showcase on Thursday 14<sup>th</sup> December, 2017. The evening forms part of their final assessment for this unit of work and all should attend from 6.30 to 9.00 p.m. Year 9 parents will have first allocation of tickets for the event for one week only. After that, sales will be opened up to all other parents. Tickets will be issued on a first come, first served basis as the event sells out quite quickly. A letter will be sent out mid-November.

Thank you for your continued support.

Yours sincerely

Mrs C Clewlow  
English Teacher

Mr P Salmon  
School Business Manager



### Year 9 WhizzBang Theatre Pantomime – Monday 4<sup>th</sup> December, 2017

- ☐ Name of student: ..... Form: .....
- ☐ I give permission for my son/daughter to watch the WhizzBang Pantomime
- ☐ I enclose £2.00 contribution towards the cost of the event.
- ☐ I do not wish to contribute.
- ☐ I am in receipt of free school meals.
- ☐ I agree to authorise any member of staff during the course of this activity to approve such medical treatment for my son/daughter as is deemed necessary in an emergency or upon the advice of a qualified medical practitioner, in the event that I cannot be contacted.

#### For office use only

|          |   |      |        |
|----------|---|------|--------|
| Receipts | £ | Date | Signed |
| Cheque   |   |      |        |
| Cash     |   |      |        |

Name: ..... Signature: ..... *Parent/Carer*

Dated: .....

Please return your slip to the school office by Monday 6<sup>th</sup> November, 2017. CC/PR