

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

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19th April, 2018

Dear Parent/Carer

Year 7 Ministry of Science Live. Theatre Severn Tuesday 19th June, 2018

I am pleased to inform you that as part of the school's commitment to promoting STEM (Science, Technology, Engineering and Maths) we are organising a trip to see 'The Ministry of Science' at **Shrewsbury Theatre Severn**. The show comes with the following warning!

'This is a public safety announcement......Please keep your head firmly on your shoulders, and your arms, legs and feet inside the ride at all times - Ministry of Science Live is about to explode onto the stage! This is not your ordinary science show – it comes with a bang. It comes with a whoosh. The show **will** contain some loud bangs and includes liquid nitrogen frozen flowers, hydrogen bottle rockets and even a hover craft on stage! '

The cost of the trip is £11.00 which covers the ticket price. Students should meet in the foyer of the Theatre Severn at 6.10 pm. The show starts at 6.30 pm and the performance lasts approximately 2 hours including a short interval. Students will need to be collected from the Theatre at 8.30 pm. Students need not be in school uniform.

If you would like your son/daughter to attend the event, please complete the slip below and return this with your payment by Wednesday 9th May, 2018.

Yours faithfully

Year 7	Ministry of Science Live Theatre trip y 19 th June 2018	F	or of	fice u	se onl	У
Name:	Form:		Receipts Cheque	£	Date	Signe
	I give permission for my son/daughter to take part in the above event.	_	Cash			
	I enclose a payment of £11.00 cash/cheque. (Please make cheques payable to Mary Webb School and write your child's name and form group of the reverse)					
	I do not wish to contribute					
	I confirm I am able to get my child to the Theatre for 6.10 pm and shall co	olle	ct them	at 8.30 p	m.	
	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.					
Name:	Signed:			parer	nt/carer	