



# Blaenavon Heritage Voluntary Controlled Primary School

Middle Coed Cae Road Blaenavon Torfaen NP4 9AW

Tel / Ffôn: **01495 766500 / 766501**

Website / Gwefan: **www.bhvcprimary.co.uk**

Acting Headteacher: **Mrs J. Howells B Ed (Hons)**

E-mail / E-bost: **bhvcprimaryhead@torfaen.gov.uk**

Acting Deputy Headteacher: **Mrs A. Coombs BA (Hons), QTS**

E-mail / E-bost: **alison.coombs@torfaen.gov.uk**

7<sup>th</sup> June 2018

**TO: PARENTS/CARERS**

Dear Parent/Carer  
Annwyl Rhieni

## **YEAR 6 FOOTBALL TOURNAMENT, CWMBRAN STADIUM – TORFAEN PREMIER LEAGUE PRIMARY STARS' CUP**

Your child has been selected to participate in a Football Tournament at Cwmbran Stadium on Wednesday next, 13<sup>th</sup> June. We will be leaving after registration and returning by the end of the school day. They will need shin pads and will be playing on a 3G pitch, so suitable footwear should include astroturf trainers or moulded studs. They also need to wear sports clothes (shorts/t-shirt, tracksuit bottoms). Hats and suncream should also be worn, weather permitting – or water proofs, if necessary. Please provide a healthy packed lunch and plenty to drink. If your child is in receipt of free school meals please select from the options available below.

We are requesting an online voluntary donation towards the cost of transport of £2.50. Please return the slip (**to Mrs L Jones**) to school by Monday next, 11<sup>th</sup> June.

Yours sincerely

**Mrs L Jones**  
**HEALTH, FITNESS &**  
**WELLBEING CO-ORDINATOR**

✂-----

## **YEAR 6 FOOTBALL TOURNAMENT, CWMBRAN STADIUM – TORFAEN PREMIER LEAGUE PRIMARY STARS' CUP**

- 1 I give permission for my child \_\_\_\_\_ from \_\_\_\_\_ class to take part in the above event on Wednesday, 13<sup>th</sup> June
- 2 I will provide my child with a healthy packed lunch and plenty to drink.
- 3 My child is in receipt of free school meals and would like a sandwich of: Ham  Tuna  Cheese
- 4 I have made an online voluntary donation of £2.50 towards the cost of transport.

Signed: \_\_\_\_\_  
PARENT/CARER

Please print your name: \_\_\_\_\_

Dated: \_\_\_\_\_

**Please return completed forms to the school office by Monday, 11<sup>th</sup> June**

**Opening the door to your future!**

**Agor y drws i'ch dyfodol!**



YR EGLWYS  
YNG NGHYMRU



THE CHURCH  
IN WALES

