

14th October 2008

Sent to attached list

Dear Parents,

We are visiting Manchester's Royal Exchange Theatre to see a performance of Sophocles' *Antigone* on **Thursday 16th October 2008** for students studying GCSE or A Level Drama and Theatre Studies or Classics/ Latin. Tickets have been booked for those students who have indicated a definite intention to participate. The visit will support GCSE and A Level Drama and Theatre Studies/ Classics students' work.

The total cost (including theatre ticket and coach transport) will be £25 which should be returned as soon as possible with the reply slip.

We anticipate a 4.30pm departure from the MTGS site, with an estimated return time of 10.30 pm. Students will need to bring cash if they wish to purchase refreshments or programmes and a packed meal or money for their evening meal. Participants will be expected to wear a crested top (e.g. Drama or P.E. kit) although this may be worn with jeans, etc.

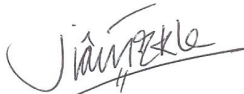
Parental permission is required for students to be released in small groups in order for them to eat. St Anne's Square has a number of establishments or students may choose to dine at the theatre; students who do not have this permission will be expected to bring a packed meal. Everyone will be made aware of meeting times and the location of staff in the event of difficulties.

It is essential that we also have two emergency contacts and their numbers for the evening itself.

Please return the reply slip immediately with payment (cheques payable to MTGS please)

Thank you for your support.

Yours sincerely,



Ms SE Tickle,
Head of Drama & Theatre Studies

✂ _____

'Antigone'

Friday 16th October 2008

Student's Name: _____ Form: _____

I would like my son/ daughter to participate in this theatre visit and enclose payment of £25 (cheques payable to MTGS please)

I do/ do not give my son/ daughter permission to be released in order to purchase food. (*please delete as appropriate*)

I understand that places have been booked for students who have expressed their intention to participate.

Signed: _____ Parent/ Guardian

Emergency Contact 1 (Name): _____ **(Number):** _____

Relationship to Student: _____

Emergency Contact 2 (Name): _____ **(Number):** _____

Relationship to Student: _____