

Contact: Miss Willis

Ref: PKI/SNI

12<sup>th</sup> February 2018

Dear Parents/Carers

**Oliver Rehearsals and Performances.**

As you may be aware, your son/daughter is involved in the Oliver performance at Brooke Weston. In preparation, rehearsals for those students involved have been arranged during the school day and evenings. The dates and times are as follows:

- **Tuesday 26<sup>th</sup> February 2019**, the rehearsals begin at **8:35 am**, finishing at **8:00 pm**. **Dinner will be provided.**

There will also be full day rehearsals during school time. The dates and times are as follows:

- **Friday 22<sup>nd</sup> February 2019**, the rehearsals begin at 8.35 am, finishing at 4.05pm
- **Monday 25<sup>th</sup> February 2019**, the rehearsals begin at 8.35 am, finishing at 4.05pm
- **Wednesday 27<sup>th</sup> February 2019**, the rehearsals begin at 8.35 am, finishing at 4.05pm

The performance dates and times are as follows:

- **Wednesday 27<sup>th</sup> February 2019**. Evening performance begins at 6.30 pm, finishing at 8.30 pm. Students to be in school by 5.30 pm
- **Thursday 28<sup>th</sup> February 2019**. Evening performance begins at 6.30 pm, finishing at 8.30 pm. Students to be in school by 5.30 pm.

For rehearsals outside normal school hours, parents are requested to arrange transport for their son/daughter from Brooke Weston. Students will also need to bring refreshments. Students are welcome to stay on between school hours and the evening performances if they wish.

If you wish your son/daughter to take part in these rehearsals, please complete the reply slip attached and return it to Miss Willis, in the Performing Arts Department as soon as possible.

Yours sincerely

P Kirkbride  
Principal

**Brooke Weston – Reply Slip**  
**Oliver Rehearsals and Performances**

**Student's Name** ..... **Tutor Group** ..... **Roll No** .....

I/we grant permission for my son/daughter to take part in the Oliver rehearsals and performances and agree to arrange transport for my son/daughter to and from Brooke Weston.

**Emergency Contact Number(s)** .....

**Signed** ..... **Dated** .....