



The HENRY BEAUFORT School

At The Henry Beaufort School there are no limitations to individual success; we do not accept mediocrity or complacency
www.beaufort.hants.sch.uk

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Headteacher: Miss S Hearle

October 2017

Dear Parents

Year 7 Disco – Thursday 19th October 2017

The Year 11 Leavers' Ball Committee and The Henry Beaufort Parents Association are delighted to invite your child to the Year 7 Disco being held on Thursday 19th October in the Drama Studio from 4.30pm to 6.00pm.

If your child would like to attend, please complete and return the slip below. The entrance fee is £3. Payments may be made online, which is our preferred method of payment. Alternatively, payment may be made using cash or cheque made payable to *Henry Beaufort School*.

This is a very special event and is only open to Year 7 students from Henry Beaufort. We will not be handing out tickets, but we will keep a list of those who are coming on the door.

We will be running a small bar which will offer soft drinks and snacks for the students to purchase. We suggest that £2 - £3 will be ample money for your child to bring on the day.

Please be aware strobe lighting may be used.

If your child would like to remain in school between the end of the school day and the start of disco, they must be registered in Home Learning Club in the library. Students should not leave the site unless accompanied by parents between Home Learning Club and the disco.

Please complete the slip below including, emergency contact details, medical information and whether or not your child is allowed to walk home after the disco. Any child without consent to walk home will be held at school until they are collected. Children being collected will be waiting in the Beacon Arts Centre at 6.00pm.

We look forward to seeing your child at the disco.

Yours sincerely

Mr Applin
AHT Pastoral

Mrs Taggart
Head of Year 11

REPLY SLIP

Year 7 Disco – Thursday 19th October 2017

Please return to: Finance Office by Thursday 12th October 2017

Child's Name: Tutor Group :

Emergency Name & Contact No:

Medical Conditions:

I give permission for my child to walk home Yes No

I am paying £ Online Cash/Cheque

Parents Name (PRINT):

Parents signature: Date: