Our Ref: 025/17

13th March 2017

Dear Parent/Carer

Mrs N. Dunne

As you will be aware, your son/daughter will be attending a Sports Science morning at Liverpool Hope University. The content this year will be primarily based around Physiology and Biomechanics (although these are subject to change, depending upon staffing). Details for the day are as follows:

Date: Thursday 16th March 2017

Venue: Health Sciences Building, Liverpool Hope University, Taggart Avenue, Hope Park, L16 9JD

Time: 10am – 12noon (If travelling to the venue please arrive by 9.50am at the latest)

Students should meet at school to travel together by taxi or confirm they are making their own way to the venue by using the reply slip below. Students will then travel back to school by taxi or school minibus. Students should come to school in practical clothing as they may take part in some testing to help support their learning.

If you require any further information please do not hesitate to contact me at school or by email. Yours sincerely,

Head of P.E	
×	
Reply Slip to Mrs Dunne – Liverpool Hope University Visit – Thursday 16 th March 2017	
Name:	Form:
Please delete as appropriate:	
I give/ do not give permission for my son/daugh March 2017 from 10am – 12noon.	ter to attend Hope University on Thursday 16 th
I understand that my son/daughter will be trave minibus.	lling to and from the venue by taxi or school

Date: _____

Signed: _____