

# Whitstable Junior School

Oxford Street, Whitstable, Kent, CT5 1DB

Tel: (01227) 272385

Headteacher: Mrs. Annie Knoupe BA (Hons) PGCE

*e-mail: [manager@whitstable-junior.kent.sch.uk](mailto:manager@whitstable-junior.kent.sch.uk)*

4<sup>th</sup> October 2018

Dear Parent and Carers,

## Girls Football Team Information & Fixtures

I am very pleased to announce that for the first time this year, Whitstable Junior School are entering a girls team in the Coastal Alliance league. Congratulations, your child has made the first squad!

Please see below a list of fixtures. Most of the games (unless stated) will be played away as we don't have a field.

We have selected a training squad of 10, all 10 of which will travel to **MOST** matches. However, some of the fixtures are on the same day as the boys team so we will be sharing a minibus. For those games we take a smaller squad due to minibus capacity. On those occasions, I will be announcing the squad for the match in school via the school sports notice board. It will be the children's responsibility to inform parents if they are playing.

Myself and Mr Kidd will be able to transport the children to matches on the minibus. You will either be able to take them home from the game, or if that is not possible, we can bring them back to school and you can collect them from there.

All games will take place after school. We will aim for a 3:30/3:45pm kick off.

### Girls football fixtures 2018/19:

Swalecliffe- **10/10**

St Mary of Charity- **1/11**

Whitstable Endowed- **6/11 TBC**

Joy Lane- **7/11**

Bysing Wood- **15/11**

Luddenham- **22/11**

Briary- **27/11**

Hampton- **5/12**

Reculver- **6/12**

Herne Bay Juniors- **12/12 (At WJS)**

Herne Juniors- **9/1**

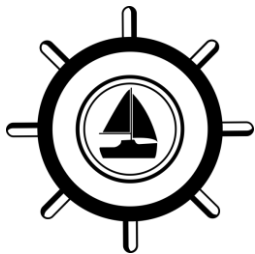
**By signing below you are consenting to your child playing in any of the matches, if your child is unable to play then they will need to let me know. No other letters will be sent out requesting permission to play.**

Any further questions or queries then please let me know.

Many thanks

Mr Peal





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My child ..... can attend any/most of the matches above and I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment including anaesthetic or blood transfusion, as considered necessary by the medical authorities present (please contact the school if you require further information or explanation).

Signed ..... Date .....

Emergency Contact No. ....

