

18th June 2018

**Rock Assembly Trip**

Dear Parent or Carer,

I am pleased to inform you that Wapping High School has been invited to attend the Rock Assembly organised by The Transformation Trust held at Wembley Arena. The event consists of a music concert and careers fair and is aimed at inspiring young people for their futures beyond school. The event is free of charge and all students in Year 7, 8 & 9 are expected to attend the event to benefit from the opportunity to talk to top universities and big brand employers which in previous years have included Barclays, British Airways, Compass, Co-op, Dell, Facebook, Lloyds, Nationwide, Pret, PwC, Siemens and Wates.

Please find details of the day listed below:

<b><u>Where:</u></b>	SSE Wembley Arena, HA9 0AA
<b><u>When:</u></b>	Thursday 12th July 2018 ( 10am - 4:30 pm) Leave school at 8:45 am Arrive back at school for approximately 5:45pm
<b><u>Details:</u></b>	A day of inspiration and celebration for secondary school children, incorporating The Futures Fair.
<b><u>How:</u></b>	By underground to Wembley.
<b><u>Cost:</u></b>	This trip is free, including travel.
<b><u>Lunch:</u></b>	Students must bring a packed lunch, unless they receive free school meals, in which case one will be provided for them.
<b><u>Medical:</u></b>	Students must identify medical conditions in consent form and bring their own medication.

Please complete the consent form attached and hand to student reception.

Yours faithfully,

Hayley Charman  
Head of Fleet House

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153 Commercial Road  
London  
E1 2DA

020 3597 3670

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Please complete the consent form attached.  
**Rock Assembly – Thursday 12th July**

**Consent Form**

Students ..... Full ..... Name: .....

.....

Tutor Group: .....

**Checklist (tick)**

- 1) I give permission for my child to attend the Rock Assembly trip at SSE Wembley Arena on 12th July 2018
- 2) I will provide my child with a packed lunch, unless they receive Free School Meals where one will be provided for them.
- 3) I have written below any crucial medical information, such as allergies, diabetes, asthma etc.

Medical Information.....

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Signature Parent/Carer.....

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Date:

Contact Number: .....

**Please give this completed Consent Form to reception or hand to Ms Charman.**