



Holy Family Catholic High School

Virgin's Lane, Thornton, Liverpool L23 4UL.

Tel: 0151 924 6451 Fax: 0151 932 1417

Headteacher: Mr M Symes BA(Hons), NPQH

Wednesday 19th March 2025

Dear Parents, Guardians, and Carers,

Confirmation of Eligibility – TenPin Southport Reward Trip

We are pleased to inform you that your child has **qualified** to attend a reward trip to **TenPin Southport** in recognition of their outstanding achievements during the **Spring Term**. This trip is a celebration of their hard work, commitment, and positive behaviour.

Trip Details

Date: Wednesday 2nd April 2025

Location: TenPin Southport

Departure & Return: Students will attend school as normal and return in time for the school bus.

Cost: £20 per person, covering coach transport, two games of bowling, and one game of laser quest. Please note that lunch is **not included**, but students may bring their own or purchase food, drinks, and arcade games at the venue.

Grouping Information

Students will be placed in **groups of up to six** for the bowling lanes. To help with organisation, your child may list up to **five** other students they would like to be grouped with. While we will do our best to accommodate preferences, we cannot guarantee all requests.

Payment & Permission

- Payment of **£20** must be made via [Scopay](#) no later than **3:00 pm on Wednesday 26th March 2025** to secure your child's place.
- The permission slip below must be completed and returned to the **Year 9 Office** by the same deadline.

We are delighted to offer this opportunity to your child as a recognition of their efforts, and we look forward to an enjoyable and rewarding experience.

Yours faithfully,

Mrs. D. Moore

Year 9 Progress Leader



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Permission Slip – TenPin Southport Reward Trip

(To be returned to the Year 9 Office by Wednesday 26th March 2025, 3:00 pm)

I give permission for my child to attend the **TenPin Southport Reward Trip** on **Wednesday 2nd April 2025**.

Student's Name: _____

Form Group: _____

I confirm that I have made the **£20 payment via Scopay**.

I understand that lunch is **not included** in the trip.

Emergency Contact Name: _____

Emergency Contact Number: _____

Medical Conditions (if applicable): _____

Parent/Guardian Name: _____

Signature: _____

Date: _____

Group Preference (Up to 6 Students Per Lane)

For students to complete: it may be an idea to discuss with your friends, so their table matches yours (While we will try to accommodate requests, these cannot be guaranteed.)

Student Name	Group Member 1	Group Member 2	Group Member 3	Group Member 4	Group Member 5