



**ST JOSEPH'S PREPARATORY SCHOOL**  
Part of the Edmund Rice Family

4<sup>th</sup> November 2016

Dear P6 Parents,

I am writing to you with some exciting news.

This year our Christmas Carol Service features the work of John Rutter. We thought that we would write and invite him to attend our concert.

Dr Rutter applied to Tristan's letter almost immediately on Tuesday and apologised that he was unable to be with us at our concert but has invited a group of children to a concert which he is conducting at the Symphony Hall Birmingham on 12<sup>th</sup> December at 7-30pm and afterwards to meet him in his dressing room for a photograph.

This is really special news for us as John Rutter is world renowned.

We would like to take some older members of the school but realise that this will be a long day and a very late arrival back home. I would anticipate that by the time we have visited Dr Rutter in his dressing room, had a photograph, toileted etc. that we will not be arriving back in Stoke much before Midnight. I would suggest that children who attended need not arrive in school until after break the following day, if parents felt that was appropriate.

I am also trying to organise a visit to Birmingham Cathedral prior to the concert, but this may not be possible due to their Christmas programme. If this was possible we would leave school after lunch and have a tea at one of the venues.

I am initially writing to you to see if you feel that is appropriate for your child to accompany us.

**Please could you indicate below on the slip and return by Friday 11th November'**

I will then send out more details when I have numbers and can make further arrangements.  
Yours sincerely

*S. D. Hutchinson*

**Mrs S D Hutchinson BEd**  
**Headteacher**



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**John Rutter Carol Service – 12<sup>th</sup> December 2016**

**Child's Name:** \_\_\_\_\_

- I would like my child to take part in this activity
- I would not like my child to take part in this activity

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Emergency Contact Number:** \_\_\_\_\_

**Medical Needs:** \_\_\_\_\_