



Dear Parent/Carer

**Noughts and Crosses – Theatre Royal Brighton – Thursday 21<sup>st</sup> March 2019**

As part of your son/daughter’s GCSE Drama course; students are required to analyse a live theatre performance. They will have to use their experience and knowledge of drama to write about the acting in their written exam. We will be taking the students to see an adaptation of Malorie Blackman’s novel ‘Noughts and Crosses’. The play follows the story of two young people kept apart by bigotry, terrorism and injustice.

The production will be touring locally in March, so it will be a great opportunity for the students to see the live performance. This experience will be extremely valuable when we have to analyse and evaluate the acting and design elements in class in preparation for the exam. It will also give the students an important opportunity to see their subject in a professional context.

We are planning to go to see the show on **Thursday 21<sup>st</sup> March 2019**. We will be leaving at **1pm** and returning to school around **6pm**. We will be travelling to the theatre by Coach and then walking to the theatre, therefore we will have the highest expectations about behaviour as the students will be representing the school. Students are required to wear school uniform.

The full cost of the trip is **£33** – this includes ticket and transport costs. Payment is required by **Monday 4th March 2019** and can be made via ParentPay.

The school holds a current medical consent form on behalf of your child but if there have been any changes since September 2018, please would you indicate on the permission slip so that we can update our records accordingly.

Yours sincerely

**Miss E McCarthy**  
**Leader of learning for Drama**

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**Please complete and return, confirming your payment via ParentPay, no later than Monday 4th March 2019**

Student Name: ..... Tutor Group: .....

I give permission for my son/daughter to attend the Theatre Royal Brighton to see Noughts and Crosses.

I have paid online through my ParentPay account

Signature :..... Date: .....  
(Parent/Carer)

Name ..... Please PRINT