

THISTLEY HOUGH  
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**THISTLEY HOUGH  
ACADEMY**  
*Creative  
Education  
Trust*

11 October 2023

Dear Parent/Carer

**Remembrance Service - Penkhull Church  
Friday 10<sup>th</sup> November 2023**

I am extremely pleased to invite your child to represent the Academy at the Remembrance Service taking place at Penkhull Church on Friday 10<sup>th</sup> November. This event has been organised by Penkhull Church, with several community groups in attendance. Students will lay wreaths at the memorial inside on behalf of the Academy and our Combined Cadet Force.

Students will be required to wear their school uniform. If your child is a member of the Academy's Combined Cadet Force, they will be required to wear their MTP military uniform. Students will leave the Academy at approximately 10:00am, under the supervision of members of staff and will return at approximately 11:30am.

If you would like your child to take part in this important event, please complete the attached reply slip and hand to Mr Harrison no later than Friday 27<sup>th</sup> October 2023.

If you have any further questions, please do not hesitate to contact me on the email address below.

Yours sincerely

Simon Harrison  
Associate Assistant Principal  
Contingent Commander Thistley Hough CCF  
[simon.harrison@thistleyhoughacademy.org.uk](mailto:simon.harrison@thistleyhoughacademy.org.uk)



**Please return to Mr Harrison by Friday 27<sup>th</sup> October**

**Remembrance Service - Penkhull Church  
Friday 10<sup>th</sup> November 2023**

**Student Name:** ..... **Form:** .....

I give permission for my child to attend the Remembrance Service held at Penkhull Church on Friday 10<sup>th</sup> November 2023.

I \*give/\*do not give consent for my child to be filmed / photographed during the event.  
*(\*please delete as appropriate)*

I \*give/\*do not give consent for photographs/filming of my child to be used on our social media platforms, within newsletters, and other promotional material for Thistley Hough Academy and/or Creative Education Trust.  
*(\*please delete as appropriate)*

Signed: ..... Tel No: .....  
*Parent/Carer*

**Medical information/Dietary Requirements:** .....  
.....

**Emergency Contact:** *(if different from above)*

Name: ..... Tel No .....