

St. Sampson's Fundraising Event hosted by
CRICKLADE CINEMA!



MOVIE NIGHT - Friday 17th May - Cricklade Town Hall

We are very excited about our upcoming fundraising event. Tickets will be on sale in the Upper School middle playground in the morning from 8.35 am on Friday 3rd May, Thursday 9th May, Friday 10th May & Friday 17th May

Tickets cost £4.00 (includes a bag of sweets and popcorn)

Discounted tickets of £3 per child will be available for families with 3 or more children at St Sampson's. There will be no ticket sales on the door, so please get your ticket early! The tickets will be sold on a first come first served basis. Please make sure that children have their water bottles with them.

For Children in FS2, Yr1 & Yr2:



Hotel Transylvania 3 (U)

Count Dracula and company participate in a cruise for sea-loving monsters, unaware that their boat is being commandeered by the monster-hating Van Helsing family.

Doors Open:

3.20 pm

Movie Start:

3.35pm

Children to be collected at

5.20 pm

For Children in Yr3 to Yr6:



Ralph Breaks the Internet (PG)

Six years after the events of "Wreck-It Ralph," Ralph and Vanellope, now friends, discover a wi-fi router in their arcade, leading them into a new adventure.

Doors Open:

5.40pm

Movie Start:

5.50 pm

Children to be collected at

7.40pm

Please bring the following slip with you when buying your ticket as you cannot buy one without it. Tickets will be issued on the morning of purchase; do not worry if your child loses the ticket as a record will be kept.

Do not hand this form into the office or to your teacher. All children with medical conditions will need to have a parental guardian present with them on the day.

Would you please ensure your child/children are collected promptly from the Cricklade Town Hall.

Thank you

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Child's Name: _____ Year Group: _____

Has permission to attend the Movie Night on Friday 17th May 2019.

<input type="checkbox"/>	I will collect my child from the Cricklade Town Hall	<input type="checkbox"/>	I will allow my child to walk home alone after the film
Name and Relationship to Child of who is collecting (please print)			
Name:		Relationship:	
Please let us know if your child has any allergies or medical conditions			
Parent/Guardian contact number (to be used in case of emergency)			
If you would like to stay during the film and volunteer to help on the day			

Signed: _____ (parent/guardian signature) Print: _____