

24 June 2025

Dear families,

Year 5 & 6 Dixons Athletics Championship

Your child has been selected to take part in the Dixons trust-wide athletics championship as part of the Dixons Cup. This event gives students from across our trust the chance to represent their academy and compete in an inspiring day of track, field and relay events, all in a world-class venue.

Dixons will make history with our first ever trust-wide athletics championship, and it's all happening at the legendary Manchester Regional Arena the home of the British Olympic trials!

To ensure we arrive on time for the event and to avoid rush hour traffic, we will be leaving school at 8am prompt. Please ensure your child has used the bathroom before leaving home and arrives at school via the main reception **no later than 7.45 am**.

Please send your child with a rucksack with sufficient water to fuel them throughout the day. Apply suncream before school and provide a named sunhat or cap. If your child suffers with travel sickness, ensure they take a tablet before leaving home and hand another tablet to a member of staff for the return journey.

The details of the visit are as follows:

Venue	Manchester Regional Arena
Date	Monday 30th June 2025
Lunch arrangements	Packed lunch will be provided by school. Please pay £2.45 unless eligible for free school meals
Time to leave school	8.00am
Time to arrive back at school	Approximately 5.00pm (Traffic dependant, updates will be sent)
Uniform Requirements	Full P.E. kit, a pair of trainers suitable for an outdoor surface and a waterproof coat suitable to wear outdoors
Transport	Coach

Please complete the consent slip below and return to school as soon as possible.

Yours sincerely,

Connor Mathie

Mr C Mathie
Sports Teacher



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I give permission for my child to take part in the Dixons Athletics Championship on Monday 30th June 2025

Please tick: Yes ☐ **No** ☐

I agree for an adult to collect my child from Dixons Marchbank office at 5.00pm

Please tick: Yes ☐ **No** ☐

I give permission for my child to walk home alone after the visit at 5.00pm

Please tick: Yes ☐ **No** ☐

I give permission for my child to be photographed at the event and understand that the organisers may use the photographs for publicity purposes

Please tick: Yes ☐ **No** ☐

Child Name	
Class	
Telephone number (in case of delay)	
Signed	
Date	