

## Year 2 - After School Multi-Sports Club

## Multi-Sports club is back!

Important information! Due to the pandemic we can only provide one-year group per term as year groups cannot be mixed so make sure you take your chance to join this term.
The club will cover a variety of different sports each week to keep your children active, healthy, improve confidence and mixing with other children from the same year.

All sessions will be held for Year 2 for the first term starting on the following dates: 9/9, 16/9, 23/9, 30/9, 7/10
$\mathbf{1 4 / 1 0}$. 21/10. The total for the 7 sessions (Term1) will be $£ 35.00$ at a cost of $£ 5$ per session. Payments can be made via internet banking with the following Bank Account details:
Sort code: 40-40-45 account number: 01288407 and as a reference, please write your name or child's name.
Alternatively, cheque's may be made payable to Adam Nicholes or correct cash given in an envelope.
To ensure your child gets a place, as places will be going fast, you must contact Adam Nicholes either via email at a.nicholes@outlook.com or phone/text $\mathbf{0 7 9 6 4 7 1 5 7 1 9}$. Places are allocated on a first come first served basis as the club can only take a maximum of 15 children. Reply permission slips must also be completed in full and handed in an envelope to either Adam Nicholes or the school office.
Children must be collected outside the main entrance of the school at 4:15pm
Children can bring a change of clothes to change into for the session, P.E kits can be worn but if they are taken home please can you bring them back as soon as possible.
Please contact Adam Nicholes if you have any questions regarding the booking using the above number.
I look forward to enhancing the sporting skills of your child/children and guarantee they will love it.

## Enjoy Sports! Keep Active! Stay Healthy! Build Confidence \& Friendships! Achieve!

## AN Sports: Year 2 - After School Multi-Sports Club Wednesday $9^{\text {th }}$ September 2020 - Wednesday $21^{\text {st }}$ October 2020

Child's first name: $\qquad$ Surname: $\qquad$ Age: $\qquad$ Class: $\qquad$
Medical Issues please state: $\qquad$ Doctors No: $\qquad$
Parent Name:
Tel No: $\qquad$ .Mob: $\qquad$
Emergency Contact Name:. Tel No: $\qquad$ .Mob: $\qquad$
After the session: (please tick as appropriate)
I will collect my child from school: $\qquad$ .My child will attend After School Club: $\qquad$

