



Seghill First School

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Headteacher: Miss T Chappell



12 February 2019

Dear Parents and Carers

Spring term B after school games club

I am delighted to announce that we have organised an **after school games club** for boys and girls in **red and green class**. The sessions will be provided by Tony Dowson from Shape Performance Coaching. He has full DBS clearance and undergone all of the checks required to work in school with children. Tony regularly works in our school providing both after school clubs and teaching PE in PE lessons.

Games club will take place after school on **Tuesdays from 3:15pm – 4:15pm** in the hall. Children must be collected at **4:15pm** from the main entrance at the school office. It is open to all children in red and green class.

The club will start on **Tuesday 26 February** and run for 6 weeks in total (Tuesday 26 February, Tuesdays 5, 12, 19 and 26 March and Tuesday 02 April).

Children need to wear their **school PE kit** (t-shirt, shorts and trainers). We are unable to lend PE kit to children who do not bring their school PE kit for this club. They will also need to bring a **drink**.

The cost for your child to attend these sessions is **£12.00**. If you would like your child to take part, please complete and return the reply slip attached in a named envelope with £12.00 by **Monday 25 February 2019**.

There is a maximum of 20 places available. If more replies are received than the number of places available, names will be put in a hat. **Please assume that your child does have a place unless we tell you otherwise.**

Yours sincerely

Miss Chappell
Headteacher

Spring term B after school games club

Child's name _____ red and green class

I give permission for _____ to attend games club for 6 weeks in total as per the dates listed.

I will arrange for my child to be collected from the school office at 4:15pm. I understand that my child must be collected on time and will not be allowed to leave school without being collected by an adult known to staff who is at least 16 years old.

I have enclosed £12.00.

I understand that my child needs their school PE kit and trainers to attend games club and they will not be able to attend if they do not have it.

Medical conditions	
Medication	
Contact telephone number	
Signed	
Date	

Please complete and return by **Monday 25 February 2019**.

Please note

We are asking you for this information about your child's medical conditions and medication in case they need medication during the session and so the coach can assess the risk in them taking part in an activity with full knowledge of their medication conditions.

We are asking you for your contact details so the coach and/or a member of staff can contact you in case of emergency without having to access other records within school.

This information will be shared with the coach at the beginning of each session and will be returned to a member of staff at the end of each session. Your details will not be taken from the premises.

Between each session, this information will be stored securely within school. At the end of the club, the reply slips will be shredded so a permanent record of this information will not be held in school.