**Tadcaster Primary Academy - After school clubs and activities – SUMMER TERM 2019**

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| **Activity** | **Day** | **Year Group** | **Venue** | **Provider** | **Cost** | **Start Date and Other details** |
| **FOOTBALL FOR ALL**  **(GIRLS & BOYS)**  Aimed towards children enjoying football, learning new skills and keeping fit. | MONDAY | Year groups 1 – 6. Maximum numbers 20. | Outside or school hall if weather poor | Tadcaster Albion FC Foundation | £20 single payment. | 10 sessions Monday 29th April, 13th & 20th May  3rd, 10th,17th & 24th June,  1st 8th & 15th of July 2019. Warm outdoor PE kit and trainers essential plus a drink. Time - 3.30 to 4.30pm |
| **SPORT TO THE BEAT**  Fun energetic workshop of sport to great energising music. | TUESDAY | Year groups 1 – 6 Maximum numbers 20 | Hall | [www.completesport.org](http://www.completesport.org) | £24 single payment. | 11 sessions Tuesday 30th April, 7th 14th, 21st May. 4th, 11th,18th 25th June 2nd, 9th, 16th July 2019  Time 3.30 to 4.30pm. PE kit and drink. |
| **LEEDS RHINOS RUGBY CLUB** | WEDNESDAY | All welcome from year groups 2 – 6. Max numbers 25 | Outside | Leeds Rhinos | Free | SECOND HALF TERM 3rd June to 18th July Outdoor PE kit & drink. |
| **GARDENING CLUB** | THURSDAY | All welcome. Max numbers 10 | Outside | Lorraine Heptinstall | £5.00 single payment. Payable to Lorraine direct to cover plants, seeds, juice and biscuits and other things | 16th May 2019 running each week for 6 weeks (weather permitting). |

-Anonymous-Scissors-1[1]--------------------------------------------------------------Please complete and return. -------------------------------------------------------------------------

AFTER SCHOOL CLUBS AND ACTIVITIES **PLEASE BOOK AND PAY FOR CLUBS ON PARENTPAY TO ENSURE THAT YOUR CHILD’S PLACE ON THE CLUB IS SECURED. RHINOS is free and cannot be booked on parent pay (first come first served). This form must be completed and returned for all clubs in any event.**

I give permission for my child (name)………………………………………… in Class…………………to attend the following clubs…………..………………………………………….…

Health information……………………………………. Emergency Contact telephone number ………………………………………………………

My child will be collected by………………………………………………………………………… AND/OR My child is permitted to walk home (YES/NO)

Signed………………………………………………………. Dated……………………………………….