**Tadcaster Primary Academy - After school clubs and activities – AUTUMN 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 2 – 6. Maximum numbers 20. | Outside or school hall if weather poor | Tadcaster Albion FC Foundation | £25 single payment.  | 12 sessions **Monday 16th September** to 9th December.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) | £17.50 single payment.  | 7 sessions from **Tuesday 10th September** to 22nd October Time 3.30 to 4.30pm. PE kit and drink. |
| **CREATIVE ARTS CLUB** Sketching, drawing and painting | WEDNESDAY | Year groups 5– 6Maximum numbers 16  | Classroom | Art Specialist - Mrs L Brooke | £ 15 single payment | 13 sessions from **Wednesday 18th September** to 18th December  |
| **DANCE CLUB****Further details to be advised on Parenthub when secured.**  | WEDNESDAY |  | Hall |  |  | To be advised on Parenthub when start date and price known |

![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. 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……………………………………….