**CSS The Coppice Primary School’s After School Clubs Autumn Phase Program**

Dear Parents/Guardian,

Welcome & thank you for showing an interest to our after-School autumn phase program. Please complete the booking form and email **css.schoolsports@gmail.com** **not the School office**.

**Football, Athletics & Multi Sports for all Girls & Boys from Y1 – Y6.**

School welcomes pupils to arrive at School already dressed for their after-School club day In their **School PE Kit** **(additional warm clothing can be packed in their school bag).** Pupils will be collected from their classrooms at the end of the School day. If the weather is bad the new School hall will be used where possible.

 **Tuesday** is for **Y1 & Y2**, **Wednesday** is for **Y5 & Y6**, **Thursday** is for **Y3 & Y4**

**Payment is only** via Bank Transfer; David J Morris account 00150834, sort code 110438

The sessions are run by qualified coaches who are insured and have an Enhanced DBS. They also hold First Aid and Safeguarding children certification and follow our own code of conduct, which ensures safety and enjoyment to all, no matter what ability.

**CSS** follows the Schools Covid 19 guidance from the DofE.

**When collecting your child from the KS1 Gate at 16:25 please be aware of Covid guidance & be considerate of other. We will call your child’s name out 1 at a time for handover!**

For personal welfare & safety your child needs to bring: -

* **Appropriate footwear and clothes (Coat, Gloves & Hat.)** **are required for outdoors in cold weather.**
* **SHIN PADS for football must be worn!**
* **Drink in a bottle, which can be refilled.**
* **If your child suffers from asthma, please make sure they bring their inhaler to the club.**

**Important! Please only email booking form to** **css.schoolsports@gmail.com**

**Football, Athletics & Multi Sports starts week commencing Mon 1st Nov 2021 for 7 weeks.**

**Cost for the 7 sessions is £42.00**

Pupil………………………………………….…………………………... **Year Group/Class**……………...

Address………………………………………………………………………………………………Post code….…….…………….

Any known medical conditions? …………………………………………………………………………...……………………….………..

Email address; ……………………………………………………………………………………………………………………………….

**In the event of an emergency please supply 2 contacts, plus name any other persons allowed to collect your child.**

1………………………………………….…Tel……………….……...……… 2 ….…………………….……. Tel………………………

3…………………………………………… Tel ……………………………….

* I would like my child to attend the coaching and I/we accept that it is the responsibility of my child to attend all sessions.
* I will make arrangements for my child’s collection by a responsible person who is named in the list above.

Parent / Guardian Signature……………………………………………………………… Date……………………….

David Morris