## Aston Hall J & I School After School Clubs

## **Summer Half Term 2**

Day	Club Name	Year Groups	Extra Information			
Mondays	Digital Animation Club	Year 3 – Year 6	Finishes at 4.20pm			
	Cost £12 for 4 weekly sessions. Pay on ParentPay once place is confirmed	16 places	Starts Monday 12 <sup>th</sup> June 2023 until Monday 3 <sup>rd</sup> July 2023 inclusive 2023.			
			Using iPads, a green screen and lots of other digital technology, you will build, create & produce your own animated short film like Wallace & Gromit, Minions or Toy Story.			
Thursdays	Athletics Club  Cost £15 for 5 weekly sessions.	Year 1 – Year 4 20 places	Finishes at 4.20pm  Starts Thursday 15 <sup>th</sup> June 2023 until			
	Pay on ParentPay once place is confirmed	20 places	Thursday 13 <sup>th</sup> July 2023 inclusive.			
			During this club you will take part in a variety of running, jumping & throwing events, learning a range of new skills and techniques.			

## **Additional Information:**

Please note that due to high demand for places in clubs, these will initially be offered to children who have not had the opportunity to take part in a club before or who did not get a place previously. After this, places will be allocated on a first-come, first-served basis; please ensure your reply forms are returned to the main office. Parents will be informed whether they have a space and when the clubs are available to pay via ParentPay. We recognise that there is a large demand for clubs after school and we will continue to expand and develop our offers and activities to accommodate as many children as we can. Where possible, we will also try to run the same club multiple times throughout the year to ensure that children can have the opportunity to take part at some stage.

## Summer Half-Term 2 – DIGITAL ANIMATION CLUB

Child's Name	Class	
I confirm that I will be collecting my child at the	e end of the club.	
By signing this form, you agree to pay for the cl	ub using the method outlin	ed in the letter.
Signed	(Parent/Guardian)	Date
Emergency contact number		
Summer Half-Term 2 – ATHLETICS CLUB		
Child's Name	Class	
I confirm that I will be collecting my child at the	e end of the club.	
By signing this form, you agree to pay for the cl	ub using the method outlin	ed in the letter.
Signed	(Parent/Guardian)	Date
Emergency contact number		

Personal Details										
First Na	ıme				Last Name					
Addre	ss						Post Code			
Daytime Tel	ephone				Evening Telephone			1		
Mobile Tele	phone		1		Date of Birth			Class and Year		
(Please circ	le one)	Male	Female		School Atte	chool Attended				
		Er	nergency Co	ntact	Details					
Name 1			Relationship to child			Teleph Numbe				
Name 2			Relationship to child			Teleph Numbe				
		Medical I	nformation / E	Behav	iour / Disabi	ility				
(This information will only be used to make the activity a positive experience for all). Please outline details of any medical conditions, disabilities OR behavioural issues that that may require additional staffing. Please include information of all allergies.										
Consent										
General Cons	sent (tick a	as appropriate)							Yes	No
I consent to my child having his/her picture taken for promotional/website purposes										
I consent to video recordings being made of my child for promotional/monitoring purposes										
I consent to members of the local press being invited to take pictures of my child										
In the event of an accident, that any medical treatment and anaesthetic may be used, if necessary, by the medical authorities present										
Can you please confirm if your child will be collected after the activity or is allowed to walk home?  Please tick the applicable box and return to school before the club start date										
(Student name	∋)		will be	collec	ted	[				
(Student name	e)		is allo	wed to	walk home					
If your child is collected please write down who will be picking them up										
Signed:					Date: _					
Name: Relationship										