

## Park Lane Primary & Nursery School

Executive Headteacher: Rob Litten

**Executive Deputy Headteacher:** Rachel Bains

31st January 2020

## February Half Term Holiday Club 2020

Dear Parents & Carers,

During the February half term, we will be running a multi-sport club open to children from Reception – Year 6. The club will take place at Park Lane Primary School.

Your child/children will need to bring a packed lunch for the day, a snack for morning break, along with a drinks bottle filled with water/soft drink, **NO FIZZY DRINKS**. We can then fill water bottles up throughout the rest of the day using the facilities at the school. Please also pack warm clothing, along with spare clothing as we will be spending time outside on the field and playground, along with a spare pair of shoes/trainers which can be worn inside. Club days will run as follows:

9am - Register and activities1pm - Sport 39:30am - Sport 12pm - Sport 4

10:30 – 10:50am – Break and snack 3pm – Cool down period 10:50am – **Sport 2** 3.15pm - Collection

12 - 1pm - Lunch and activities

The club will be run by Mr Bailey, who is First Aid trained and qualified to deliver various sporting activities, so children can expect to gain knowledge and skills of various sports being offered.

Club dates & costs:

Monday 17th and Tuesday 18th February £12 per day

Payments to be made online at <u>www.schoolgateway.com</u> or by collecting a voucher from school to pay at a local PayPoint.

To book, please complete the form below, **ensuring you include an email address**, and return to the school office or email to <u>ABailey@newroad.cambs.sch.uk</u> If you have any questions, please feel free to contact Mr Bailey via email.

Yours sincerely,

Mr R Litten Executive Head

Park Lane, Whittlesey, Peterborough, Cambs PE7 1JB
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e-mail: office@parklane.cambs.sch.uk www.parklane.cambs.sch.uk

Park Lane Primary

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## February Half Term Holiday Club 2020

Childs NameClass
Email address
I wish to book my child/children on to the October Half Term Holiday Club.
Day/Days Attending (Please circle):
Monday 17 <sup>th</sup> Feb Tues 18 <sup>th</sup> Feb
Medical Info (Please state any medication to be given on the day):
Emergency Contact 1 Name and Telephone number(s):
Emergency Contact 2 Name and Telephone number(s):
I give consent for my child/children to have their photo taken:  YES/NO
I have paid £ on www.schoolgateway.com
I would like to request a voucher to pay at a PayPoint
Signed Parent/Carer:Date