



FARNBOROUGH PRIMARY SCHOOL

Farnborough Hill, Farnborough, Orpington, Kent BR6 7EQ

Telephone 01689 853295 Fax 01689 889286

Email: admin.office@farnborough.bromley.sch.uk

Website: www.farnboroughprimary.co.uk

Miss A James BA PGCE Head Teacher

Mrs C Browne B.Ed Hons Head of School

30 March 2021

Dear Parents

After School Athletics Club – Summer Term 2021 – Years 3 and 4

We are pleased to advise you that Progressive Sports will be running an After School Athletics Club open to the children in Years 3 and 4 for 6 sessions in the Summer Term 2021.

The Club will run each Friday after school 3.10pm-4.15pm starting on the Friday 23 April 2021. Places will be allocated according to the submission of their forms via email to the School Office.

The children will be required to wear the school PE kit or suitable sports wear with trainers and have a waterproof coat available.

The sessions will be from 3.10pm – 4.15pm on the dates listed below.

Friday 23 April 2021

Friday 30 April 2021

Friday 7 May 2021

Friday 14 May 2021

Friday 21 May 2021

Friday 28 May 2021

The cost is £18 for 6 sessions.

Please complete the form attached and return it to the school office if you would like your child to attend.

Yours sincerely

Mr Atkinson
PE Coordinator



Farnborough Primary School is a member of **Nexus Education Schools Trust**

Nexus Education Schools Trust (NEST) is a charitable company

limited by guarantee and registered in England and Wales

Company Number 08753718.

The registered office is at Worsley Bridge Primary School, Brackley Road, Beckenham, Kent BR3 1RF.

National Support School
designated by



National College for
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Payment of £18 - Via SIMs Pay or Cheque (made payable to Farnborough Primary School)

It is imperative that this form is completed and returned to the school **before the start of the activity**. Failure to do so could result in your child being unable to take part.

The following details will remain confidential.

Name Age

Date of Birth Male/Female (*please delete*)

Address
.....
.....

Postcode

Day Time Telephone Number

Contact in the event of an accident

Telephone Number

Details of medical condition / disability (*if appropriate*)
.....
.....

Details of any long-term medication
.....

Signed Date

Name (blockcaps) Mr / Mrs / Miss / Ms / Other
.....

Please return to the School ASAP



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