

## FARNBOROUGH PRIMARY SCHOOL

Farnborough Hill, Farnborough, Orpington, Kent BR6 7EQ

Telephone 01689 853295 Fax 01689 889286 Email: <a href="mailto:admin.office@farnborough.bromley.sch.uk">admin.office@farnborough.bromley.sch.uk</a> Website: <a href="mailto:www.farnboroughprimary.co.uk">www.farnboroughprimary.co.uk</a>

Miss A James BA PGCE Head Teacher
Mrs C Browne B.Ed Hons Head of School

14 September 2021

Dear Parents/Carers,

## After School Netball Club - Autumn Term 2021 - Years 5 and 6

We are pleased to advise you that we will be running an After School Netball Club open to the children in Years 5 and 6 for 5 sessions initially.

It will be run by Mrs Duplock and the year 6 teachers and will consist of a variety of skill, practices and matches with a view to playing other schools later on in the year.

The Club will run each Friday after school 3.15pm-4.30pm starting on the Friday 17 September 2021. Places will be allocated according to the submission of their forms, in person to the school office from 8.40am on Wednesday 15 September. Forms will not be accepted before this time. Copies of the letter will be available in the letter rack in the reception area.

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 3.15pm – 4.30pm on the dates listed below.

Friday 17 September 2021 Friday 24 September 2021 Friday 1 October 2021 Friday 8 October 2021 Friday 15 October 2021

There are limited places so we will allocate places according to the submission of the forms. We will confirm by Thursday 16 September who has a place. We will continue the club after October half-term but we will offer those places first to those who were not able to secure a spot this time.

Yours sincerely

Mr Atkinson
PE Coordinator





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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
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
Signed Date
Name (blockcaps) Mr / Mrs / Miss / Ms / Other

Please return to the School ASAP



National Support School
designated by

National College for