Inspiration Tree

12 Aysgarth Court | 3 Clifford Drive | Menston | LS29 6FY

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18 March 2024

Dear Parent/Guardian,

Multi Sports - After School Club Year 4

I am writing to inform you that we are continuing the multi-sports coaching opportunity for hovs & girls in $\forall r = 0$ S C

at Rossett Acre on To structured multi-spo coach. The multi spo	rts activities which w	he club will provi vill include set tea	de pupils with a sching drills, and	n opportunity t	o engage in hig	gh tempo	
 Athletics 	Cricket	Basketball	Tennis	Gymnasti	nastics		
 Football 	Dodgeball	Uni-Hoc	Multi-Skills	Dance	Dance		
This is a mixed cours and cover key skills f		girls and who are	keen to develop	their skills in a	wide variety o	of sports	
To reserve a place							
20 names will be dra academic year. To re March. A confirmation cheque made payab 31460811 once your would you contact u	eserve a place on the on text will be sent to le to Inspiration Tree place has been conf	club, please retu o confirm your ch e or you can pay b irmed. For inforn	rn the application ild's place. To p by BACS to Inspir	on form to school ay for the club ration Tree 40-3	ol by Friday 22 you can return 35-33 and acco	: n a unt	
				Club:	Boys & Girls	3 Yr. 4	
Please do not hesitate to contact me if you have any queries.				Day:	Tuesday Afternoon		
Yours sincerely,				Time:	3:30pm-4:30pm		
				Location:	Rossett Acre	е	
Nicky Wilce				Dates:	9 th April – 21 st May		
Inspiration Tree				Tuition Fee:	£28 (7 Weeks)		
 Tuesday Multi Sp	oorts Club	Rossett Ace	e Yr. 4	9 th April – 21 st May			
I give permission for	my child	child in Yr to attend			(F)		
the Multi Sports Afte	er School Club. We re	equire all the field	s below to be co	ompleted.		S	
Home Tel:		_ Mobile:					
Email Address:							
Medical Conditions:							
1: My child will be co	ollected by: (Please p	orint parents first	name)				

Declaration

I/We, as parent(s)/guardian(s) apply for our son / daughter to enrol on the Inspiration Tree multi sports club and herby give my permission for them to participate in all course activities. As parents(s) / guardian(s) of the above player, I/We certify that he / she is in excellent health. I/We give permission for my son / daughter to be treated for illness or injury sustained playing and transfer my child to hospital should an emergency arise. I have read and understood the above.

Parent/Guardian's signature:	—— Date: —— /—	— / 2023
raient/ Guardian 3 Signature.	— Date. — /—	- / 2023

2: My child will be attending the Fun Club club after multi-sports: () *Please tick if yes