



8th October 2024

Dear Parent/Guardian,

Opportunity for Gymnastic Coaching

I am writing to inform you that we are offering a Gymnastic coaching opportunity for boys and girls in Yr. 3 at Rossett Acre School on Friday after school. The club will provide pupils with an opportunity to engage in structured gymnastics activities. This is a mixed course for both boys and girls and who are keen to develop their gymnastic skills and abilities. No previous gymnastics experience is required. The club will cover the following gymnastics activities:

- | | | |
|---------------------------------------|---------------------------|-----------------------------|
| • Balance (individual, pair, & group) | Rolls (forward, backward) | Stands (head & hand) |
| • Cart Wheels | Fun Gymnastic activities | Individual Acrobatic Skills |
| • Pair & Group Balances | Flexibility Skills | |

Gymnastics Club – Options to reserve a place & pay for the club

To reserve a place on the club, please return the application form to school. **Priority will be given to children who did not take part in this term’s club.** A confirmation text will be sent to confirm your child’s place. To pay for the club you can return a cheque made payable to **Inspiration Tree** or you can pay by BACS to Inspiration Tree 40-35-33 and account 31460811 once your place has been confirmed. **For information on the course or about registrations, please would you contact us directly and not the school office.**

Please do not hesitate to contact me if you have any queries.

Yours sincerely,

Nicky Wilce
Inspiration Tree

Club:	Yr. 3 - Boys & Girls
Day:	Friday afternoon
Time:	3:30pm-4:30pm
Location:	Rossett Acre
Dates:	8 th Nov – 13 th Dec <i>No session on 15th Training Day. First session will be a different sport outside.</i>
Tuition Fee:	£20 (5 weeks)

Friday After School Gymnastics Club Rossett Acre – Yr. 3 8th Nov – 13th Dec

I give permission for my child _____ in Yr _____ to attend

the After School Gymnastics Club. We require all the fields below to be completed.

Mobile: _____ **Home Tel:** _____

Email Address: _____

Medical Conditions: _____

1: My child will be collected by: (Please print parents first name) _____

2: My child will be attending Fun club after gymnastics: () *Please tick if yes

Declaration

I/We, as parent(s)/guardian(s) apply for our son / daughter to enrol on the Inspiration Tree gymnastics after school club and hereby give my permission for them to participate in all course activities. As parents(s) / guardian(s) of the above player. 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: ____ / ____ / 2024