

Venue

Lanchester EP Primary School, Front Street, Lanchester. DH7 0HU

Activity

Football & Multisport Activities

Dates

Monday 22nd – 24th October

Early Drop-off	Sports	Lunch	Sports	Late Pickup
8am-9am	9am-12pm	12pm-1pm	1pm-4pm	4pm-5pm

8.00am - 5.00pm				
1 Child	2 Children	3 Children		
£17.50	£30.00	£40.00		
8.00am - 1.00pm OR 1.00pm - 5.00pm				
1 Child	2 Children	3 Children		
£7.50	£12.50	£17.50		

Courses are open to children aged 4-11 years old. Your child will need to bring a packed lunch and plenty of fluids, suitable clothing and footwear. Please note courses will be in and outdoors so trainers are necessary. To register your child, please complete the attached form and return to either Mr Graham or Lanchester EP Primary School Office.

A deposit of £5.00 per day is required when handing in the form. Failure to provide a deposit could result in your child not having a place. The outstanding balance will need to be paid on the day in cash only.

For further information, please call Mr Graham on 07736384803 or email lewisgraham91@hotmail.co.uk



BOOKING FORM

Name	Age	
Emergency Contact Number:		
Address & Postcode:		
Please circle dates & times to a	ttend:	

Monday 22 nd October	8am – 5pm	8am – 1pm	1pm – 5pm
Tuesday 23 rd October	8am – 5pm	8am – 1pm	1pm – 5pm
Wednesday 24 th October	8am – 5pm	8am – 1pm	1pm – 5pm



MEDICAL CONSENT FORM

Medical Conditions:	
Details of any current medication:	
We, the undersigned, in consideral LJG sports coaching activities and application form, we agree to the form and I consider them capable of tall programme. I have completed the listed any medical conditions and whilst my child is taking part in Latthe event of illness or accident, I necessary given to my child whilst note that LJG Sports Coaching is injury that any child sustains who parents/guardians responsibility to any medical conditions that could	d the information supplied on the ollowing: My child is in good health king part in the multisport/football he application form where I have I details of any medication taken IG Sports Coaching activities. In consent to any first aid treatment at taking part in activities. Please not liable for any personal loss or hilst on the programme and it is o inform LJG Sport Coaching of
Parent/Guardian Name:	
Signature:	Date: