**Montpelier Primary School Year ¾ Girls’ Football Club September 2021**

Dear Parent/Guardian

Plymouth Argyle Football in the Community Trust is delighted to be holding an After School Club at Montpelier Primary School (3.15pm-4.15pm) for girls in years 3 and 4 on Fridays up until half-term

The course will run for 6 weeks commencing on Friday 17th September and will finish on Friday 22nd October**.** The cost would usually be £21, however, the school are requesting a contribution of £10 for the entire 6 week block of sessions. Numbers are limited, so if more than 16 children wish to attend, the school will draw the names out at random. **Forms must be completed and handed to Mr Robinson in 5P by Friday 10th September. No money is required yet.**

You will be informed if your child has been successful in gaining a place in this club on Monday 13th September, with details of how to pay also. Those who are unsuccessful will be placed on a waiting list in case a place becomes available. If the club proves popular, the school will look to run a second club after half-term for a different group of Year 3 & 4 Girls who were on the waiting list.

All of the children who attend the course should have a parent/guardian collect them after each session.

Children will need to bring with them trainers, shin pads, and a drink. Our coaches are CRB checked, hold a UEFA coaching qualification and have Emergency First Aid Training. If you have any questions or queries, please do not hesitate to Mr Robinson in school.

I look forward to seeing your child on the course.

Kind Regards

Stew Walbridge

Plymouth Argyle Community Trust

Football Development Officer

# CONSENT FORM FOR PLYMOUTH ARGYLE FOOTBALL IN THE COMMUNITY TRUST AFTER SCHOOL CLUBS PROGRAMME

Please complete and return the form below, which relates to the forthcoming programme for which you have received details. The form gives your consent for your child to take part in this programme & all medical fields for our staff.

**NAME OF PLAYER: Class: DATE OF BIRTH:**

**ADDRESS: POSTCODE:**

**HOME/EMERGENCY CONTACT NUMBER: Email:**

**MOBILE:**

**Nationality: Primary Language:**

**HOME/EMERGENCY CONTACT NUMBER:**

**MOBILE: EMAIL:**

**Dates: Friday 17th September- Friday 22nd October**

**School Attending: Montpelier**

**Amount: £10.00**

**SIGNATURE OF PARENT/GUARDIAN………………………………………..DATE……………………**

## Please read and tick the appropriate boxes:

* **I agree to collect my child at 4.15 from Montpelier, once the club has finished.**
* **I agree for my child (under 16 years of age) to participate in the above course**
* **I agree that a Plymouth argyle coach may treat any injury which my child may sustain whilst on the course**
* **I agree to my child having his/her photo being taken or video recorded for our website/programme/local newspaper**
* **I agree to relevant information such as soccer schools being sent to by Plymouth Argyle Football in the Community Trust**
* **I AGREE TO ARGYLE COMMUNITY TRUST SHARING THE ABOVE INFORMATION WITH YOUR CHILD’S SCHOOL WHERE RELEVANT**

**Doctors Name and Address:**

**SPECIAL DETAILS**

Any relevant information concerning your child’s health requiring special attention but which does not prevent him or her taking part should be noted below. For example does your child:

* Have any allergies?
* Take medication and if so what is the dosage required?
* Have diabetes, asthma or epilepsy?

**Does your son/daughter have any disabilities that the Community Trust should be made aware of? If so please specify**

**Is your son/daughter taking any medication that the Community Trust should be made aware of? If so please specify**