



Create! Drama

Summer Term 2019 Create! Drama at Garden Fields School

Name of club: **Create! Drama**
 Year Groups: **Years 4, 5 and 6**
 Day: **Thursdays**
 Start Time/End Time: **3.20pm – 4.30pm**
 Location: **Breakout Room**
 Contact: **Fiona Brookman fionabrookman@live.co.uk 07840 281 798**
 Name/Email/Number:
 Cost: **£60 (£6 per session), 10 weeks total**
 Payment Details: **Cheque or direct transfer (bank details available upon request)**

Reception, Yr1 & Yr 2 Parents; please note that children must be supervised by an adult at the end of school and before an after school club starts.

PLEASE NOTE THAT YR 5 CHILDREN ARE AWAY 22ND, 23RD & 24TH MAY AND YR 6 CHILDREN ARE AWAY W/B 20TH MAY – 24TH MAY.

Overview of club dates (in **RED & BOLD**) SUMMER TERM 2019

1 st half term	Mon	Tue	Wed	Thurs	Fri
Wk 1	Bank Holiday	Inset Day	24 th April	25th April	26 th April
Wk 2	29 th April	30 th April	1 st May	2nd May	3 rd May
Wk 3	Bank Holiday	7 th May	8 th May	9th May	10 th May
Wk 4	13 th May	14 th May	15 th May	16th May	17 th May
Wk 5	20 th May	21 st May	22 nd May	23 rd May	24 th May
HALF TERM					

2 nd half term	Mon	Tue	Weds	Thurs	Fri
Wk 6	3 rd June	4 th June	5 th June	6th June	7 th June
Wk 7	10 th June	11 th June	12 th June	13th June	14 th June
Wk 8	17 th June	18 th June	19 th June	20th June	21 st June
Wk 9	24 th June	25 th June	26 th June	27th June	28 th June
Wk 10	1 st July	2 nd July	3 rd July	4th July	5 th July
Wk 11	8 th July	9 th July	10 th July	11th July	12 th July
END OF TERM					

Other information

PLEASE NOTE THAT YR 5 CHILDREN ARE AWAY 22ND, 23RD & 24TH MAY AND YR 6 CHILDREN ARE AWAY W/B 20TH MAY – 24TH MAY.

Please complete the permission slip and return to the School Office with payment in an envelope marked with your child's name and club name. **Spaces will be allocated on a first come first served basis.**

Name of club: Create! Drama	
Child's name:	
Year group:	Class:
Name of parent/carer:	Email address of parent/carer:
Emergency contact number:	
Special Educational Needs:	
Medical conditions/allergies:	
Please contact me to discuss my child's medical needs and arrangements for their medicine. Please tick if required. <input type="checkbox"/>	
<ul style="list-style-type: none"> I understand that it is my responsibility to ensure that my child remembers to attend the club and I will make every effort to inform the club leader if my child is unable to attend. Please tick <input type="checkbox"/> I give permission for my child to make his/her own way home at the end of the club (YEAR 6 CHILDREN ONLY) Please tick <input type="checkbox"/> 	