



Summer Term 2019 **GLEE CLUB** at Garden Fields School

Name of club: **GLEE CLUB – PERFORMING HERTS**
 Year Groups: **Years 3 4 5 and 6**
 Day: **Mondays**
 Start Time/End Time: **12.45-1.25pm**
 Location: **YR 6 Breakout Area**
 Contact Name/Email/Number: **Jenny Jones performingherts@hotmail.com 07471894258**
 Cost: **Total £40 (£36 fees plus show costume fee - £4)**
 Payment Details: **Preferred method of payment - Internet transfer- Performing Herts Account 17467519 Sort Code 60 18 11 Please put students name as reference .Cash/cheques to be left at school office. Cheques payable to Performing Herts. (please add £1 to total if paying by cheque)**

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	25 th April	26 th April
Wk 2	29th April	30 th April	1 st May	2 nd May	3 rd May
Wk 3	Bank Holiday	7 th May	8 th May	9 th May	10 th May
Wk 4	13th May	14 th May	15 th May	16 th May	17 th May
Wk 5	20th 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	3rd June	4 th June	5 th June	6 th June	7 th June
Wk 7	10th June	11 th June	12 th June	13 th June	14 th June
Wk 8	17th June	18 th June	19 th June	20 th June	21 st June
Wk 9	24th June	25 th June	26 th June	27 th June	28 th June
Wk 10	1st July	2 nd July	3 rd July	4 th July	5 th July
Wk 11	8th July	9 th July	10 th July	11 th July	12 th July
END OF TERM					

Other information

Show on 23rd June 2019 at The Alban Arena- price shown above includes costume fee. If you would not like to take part in the show please let Jenny know ASAP. All new students joining in Summer Term 2019 will unfortunately not be able to take part in the show this year. Please email performingherts@hotmail.com with any concerns/questions

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. **If you are a current student you do not need to return your form unless any details have changed.**

Name of club: GLEE CLUB	
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"/> 	