



Dear Parents & Child

The Hotshots school basketball club starts again on **Wednesday 26th September**. The club times will be the same as last year (Every Wednesday from 3.25 – 4.10pm) and will run EVERY week throughout the whole year. Due to the year six children all going to senior school there are now some places available at the basketball clubs.

There are 28 places at the club for the children. The places will be on a first come first served basis. Should your child wish to attend the basketball club we ask that the parents fill in and return the slip below to **the school office** no later than **9am** first thing on **“MONDAY 24TH SEPTEMBER”**. All children that get into the club will be notified by the end of school on Monday.

*Please note if your child attended the club last year they will have a place reserved, **however** they must still have their slip filled in and returned to the office by the deadline or their place **may be lost**.*

The cost of the club is £3 a session, and the subs are **£36 till xmas** (12 sessions @ £3). Payments will be made by cash / cheque only and cheques to be made payable to **Hotshots Basketball**. **Please ensure that this is given to the school office or the coach at the first session.**

All children who gain a place at the basketball club must get changed into their sports kit and be in the school hall every Wednesday at 3.25pm. Whilst at the club, the children will be taught a variety of skills and rules, as well as playing in matches & tournaments against other Hotshot clubs. There will also be prizes such as basketballs, t-shirt, certificates and monthly awards for the children to win.

Yours Sincerely

Kris Jenkins
Manager / Coach
Hotshots Basketball Club

PLEASE NOTE THIS FORM MUST BE FULLY COMPLETED FOR YOUR CHILD TO BE CONSIDERED FOR A PLACE

I confirm that I would like my child to attend the Hotshots school basketball club. I give the Hotshots Basketball Coach, who is first aid trained my consent for them to administer basic first aid should it be needed. **PLEASE COMPLETE ALL OF THE FORM CLEARLY**

Please print in capitals.

Parents Signature.....Home Tel.....

Child's Name.....Age.....

Address in full.....

.....Postcode.....

Mobile No's.....OR..... Sch Hopping Hill 18-19
We must have at least 1 mobile number as we may confirm your child's place via text message

Medical notes (i.e. Asthma)..... Year.....Teacher (example 5SM).....

Email (Hotshots use only):.....

Please tick one of the following: (Please note this section is only applicable to the after school clubs)

My child will be collected after basketball. I give my child permission to walk home after basketball.

Please tick if your child attended last year