

**14<sup>th</sup> September to 14<sup>th</sup> December '17 (not including half term)**

**We hope your child is enjoying their gymnastics sessions with us. If they would like to continue next term, we require the attached slip completing and please note that fees are also now due to retain their place.**

Fees are £57.50 for the term. This includes 13 weeks of gym (working out at £3.50 per session). **Please complete the attached slip and place in a named envelope along with the fees and hand them into the coach or the school office by 22<sup>nd</sup> September.**

*For those of you wishing to pay by cheque, please make them payable to 'Little Tricks. If you would like to pay via bank transfer, our details are Sort Code = 09-01-28, Account Number = 84488072. Please put your child's names as a reference. Also please ensure that you still complete the slip below and hand it back to us).*

***Please note once you have signed this consent letter, responsibility for your child is handed over from Meriden School to the club representative on the specified day and at the specified time, as indicated above. We ask that you note on the attached slip the name or names of authorised adults who will be collecting your child after the club along with their telephone numbers. Any alternative arrangements to this must be communicated directly to us and not school before the start of the club that day.***

If your child no longer wants their place, would you please let me know as soon as possible so that we can offer a place to someone on the waiting list. May we take this opportunity to wish you all very happy holidays.

Nikki - Little Tricks Gymnastics  
email Nikki@littletricks.co.uk 07964 345540

**Please complete the slip below and place in a named envelope along with the fees and hand in to the coach or school reception**

Meriden —  Please find enclosed Fees £57.50  
 I have paid by Bank Transfer \_\_\_\_\_

(date of transaction)

Child's Name \_\_\_\_\_

Parent/Carer Name \_\_\_\_\_

Parent/Carer Email address \_\_\_\_\_

Emergency Contact Number \_\_\_\_\_

Does your child have any \_\_\_\_\_  
medical conditions we should be aware of?

Who will be collecting your \_\_\_\_\_  
Child from the after school gymnastics session?