MMargaret McMillan Primary School

Inspiration • Aspiration • Determination

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Head Teacher : Mrs Lorraine Martin

## Summer Holiday Club

Dear Parent/Carer

We have secured funding to offer a FREE summer holiday Club for 3 weeks in the Summer. It is being run by our own teaching staff.

## You can sign your children up to either 1,2 or 3 weeks.

Week 1 - Monday $20^{\text {th }}$ July, Tuesday $21^{\text {st }}$ July, Wednesday $22^{\text {nd }}$ July
Week 2 - Monday $27^{\text {th }}$ July, Tuesday $28^{\text {th }}$ July Wednesday $29^{\text {th }}$ July
Week 3 - Monday $3^{\text {rd }}$ August, Tuesday $4^{\text {th }}$ August, Wednesday $5^{\text {th }}$ August

For each week they attend, children will receive an activity pack to take home and keep, containing resources and fun things to keep them occupied over the holidays.

The children are expected to attend all 3 days if they sign up to attend in a week.

The risk management strategies and approaches that we currently are running in school will apply during the holiday clubs to ensure that we keep staff and children as safe as possible.

Lunch will be provided by the school. The day will start at 10am and finish at 2 pm , and children will need to be collected from school.

There are 30 places and these will be given on 'first come, first served' basis, so please return your form as soon as possible. If your child is currently not in school - you are still able to apply by either completing the form on Weduc, printing and returning this letter or by telephoning school. If your child has brothers or sisters at Margaret McMillan Primary School and you would like them to attend, please write their names on the form. The closing date is Thursday $9^{\text {th }}$ July . If you have any questions, please contact the school.
Yours sincerely


Mrs Martin
Headteacher



## Please return by Thursday $9^{\text {th }}$ July

Name of children that would like to attend the holiday club:

|  | Class |
| :---: | :---: |
| ............................................................ | Class |
| ..................................................... | Class |
| . | Class |
|  | Class |

Please tick the weeks your child would like to attend;
$\square$ Week 1 - Monday $20^{\text {th }}$ July, Tuesday $21^{\text {st }}$ July, Wednesday $22^{\text {nd }}$ July
$\square$ Week $2-$ Monday $27^{\text {th }}$ July, Tuesday $28^{\text {th }}$ July Wednesday $29^{\text {th }}$ July
$\square$ Week 3 - Monday $3^{\text {rd }}$ August, Tuesday $4^{\text {th }}$ August, Wednesday $5^{\text {th }}$ August

Parents Name(s)
Mum
..................................................................... Dad

## Please provide a number that you would like to receive a text message on;

Contact Number

Please provide 2 alternative telephone numbers in case of an emergency;

1. Telephone Number

Relationship to child
$\qquad$
$\qquad$
2. Telephone Number $\qquad$ Relationship to child $\qquad$

I understand my child/my children must attend all 3 days of each week.

Signed $\qquad$ (Parent/Carer)

Name (Please print name)

A separate medical form will be sent out following return of this form.

