



## ST NICHOLAS CE PRIMARY ACADEMY

### CLUBS

Clubs will run from Monday 6<sup>th</sup> October 2025 – Thursday 4<sup>th</sup> December 2025.  
The £5 charge for clubs is a one-off payment that covers the whole time that the clubs run.

#### MONDAY

<b>Basketball &amp; Handball Club</b> <b>Rowan Class</b> <b>£5</b>	3:15 - 4:15pm	Miss Arnold & Mr Dewey	Y4, Y5 & Y6
<b>Fun with Signs Club</b> <b>Nurture Room</b> <b>£5</b>	3:15 - 4:15pm	Mrs Spencer- Rogers & Mrs Dale	Y1, Y2, Y3, Y4, Y5 & Y6

#### TUESDAY

<b>Art Club</b> <b>Maple Class</b> <b>£5</b>	3:15 - 4:15pm	Miss Fellows & Miss Jupe	Y3, Y4, Y5 & Y6
<b>Choir Club</b> <b>Music Room</b> <b>£5</b>	3:15 – 4:15pm	Miss Howes & Mrs Clayton	Y2, Y3, Y4, Y5 & Y6
<b>Zine Making Club</b> <b>Hare Class</b> <b>£5</b>	3:15 – 4:15pm	Mr Young & Mrs Smith	Y1 & Y2
<b>Technique Soccer School (KS1)</b> <b>Outside Company</b>	Bookings must be made through TSS website – <a href="http://www.techniquesoccerschool.com">www.techniquesoccerschool.com</a>		

#### WEDNESDAY

<b>Art Club</b> <b>Art Room</b> <b>£5</b>	3:15 - 4:15pm	Miss Corbett & Miss Evans	Y1 & Y2
<b>Technique Soccer School (KS2)</b> <b>Outside Company</b>	Bookings must be made through TSS website – <a href="http://www.techniquesoccerschool.com">www.techniquesoccerschool.com</a>		

#### THURSDAY

<b>Craft Club</b> <b>Hedgehog Class</b> <b>£5</b>	3:15 - 4:15pm	Miss Hopper & Miss C Williams	Y1 & Y2
<b>Dance Club</b> <b>Junior Hall</b> <b>£5</b>	3:15 - 4:15pm	Miss Frampton & Miss Cox	Y2 & Y3
<b>Scratch Coding Club</b> <b>Beech Class</b> <b>£5</b>	3:15 – 4:15pm	Mr Houghton & Miss Ellis	Y3, Y4, Y5 & Y6
<b>Recorder Club</b> <b>Chestnut Class</b> <b>£5</b>	3:15 - 4:15pm	Miss Kay & Miss Mattock	Y3, Y4 & Y5



## **CLUBS**

All clubs will take place regardless of the weather – outdoor activities will be held inside when it rains.

If your child signs up to one of these clubs he or she is expected to attend every week. If for some urgent reason (e.g. doctor's appointment) your child is unable to attend a session please notify the school office by telephone or in writing.

Please collect your child from outside the class where the club is being run or from the parent shelter if the club is in a hall.

PLEASE USE REPLY SHEET TO SELECT YOUR PREFERENCES.

Due to the high demand for a restricted number of clubs, they will be allocated by random selection. This is to ensure everyone has a fair chance including those children not picked up directly from school. There is a limit of 2 choices per child.

Here is your guide to selecting and hopefully being allocated a place.

1. Read through the choice of clubs available to your child's year group.
2. Fill in the application form and complete the 'choices' reply slips, and return it to the class teacher.
3. The reply slips will go into a box and be picked out randomly.
4. If your child's application is picked out then you will have an acceptance letter sent out with a request for payment. Unsuccessful applications will be kept on a waiting list.
5. Pay for clubs using My Child at School (MCAS) before they begin.
6. Your child can start attending their club!

**Closing date for club applications will be the morning of Friday 26<sup>th</sup> September 2025. Applications made after this date will not be entered into the draw but will go on the waiting list. You will be notified of successful applications by Friday 3<sup>rd</sup> October 2025.**

Clubs will start the week beginning Monday 6<sup>th</sup> October 2025.

**Clubs Reply**

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

Class \_\_\_\_\_

Club Choice \_\_\_\_\_

**and/or (Please delete as appropriate)**

\_\_\_\_\_

**I give permission for my child to walk home** ☐

**I will collect my child after the activity** ☐

**My child attends Abacus after school club** ☐

Does your child suffer from any medical/additional needs or allergies (Yes / No – delete as appropriate) If yes please give details:

\_\_\_\_\_

During this activity my contact phone number is:

\_\_\_\_\_ (Home)

\_\_\_\_\_ (Mobile)

I agree to notify the school if my child is unable to attend ☐

In the unlikely event of an accident, I agree to my child receiving all medical treatment required, including the administration of anaesthetic as deemed necessary by a qualified member of the medical profession **Yes** ☐ **No** ☐

Signed \_\_\_\_\_ Parent/Carer

Date \_\_\_\_\_