



St. John's CE Primary School

Growing and learning together
Sharing the love of God

Headteacher: **Amanda Aze**
Chair of Local Advisory Board: **Vivien Sloan**

Coombe Avenue, Weymouth, Dorset, DT4 7TP
Email: office@stjohnswey.dsat.org.uk
Website: www.stjohns.dsat.org.uk
Tel: 01305 785711 20th September 2023

Dear Parents/Carers,

After School Choir Club Years 4, 5 & 6 – Tuesday 3.15-4.00pm

We are excited to announce that we are able to offer a free Choir Club to Years 4, 5 & 6. The club will be run by Mrs Emily Allen. The first session will be on Tuesday 26th September and will run up to Christmas. You will be notified by In-App Message if the club is cancelled for any reason, please ensure that you can access these.

There are 30 places available which will be offered on a first come first served basis. This is managed by Arbor and when the club becomes full, you will no longer be able to book a place. Please go to 'Quick Actions', click on 'Clubs' and select 'Years 4, 5 & 6 Choir Club'. Booking opens at 6pm on Wednesday 20th September and closes at 6pm on Sunday 24th September.

Children must be collected from the office promptly at 4.00pm. Please be aware that the college gate and Lodmoor gate are now locked from 3.30pm so please use the main entrance on Coombe Avenue. Over the autumn term the days get shorter and clubs will be finishing as it gets dark. Therefore, we would like ALL children to be collected from the clubs.

When your child's space has been confirmed in the club, you will receive a link via email to an online consent form. **This MUST be completed before your child can take part in the club.**

Yours faithfully,

Mrs Emily Allen
Year 4 Teacher



After School Choir Club Years 4, 5 & 6 – Tuesday 3.15-4.00pm

This permission slip should ONLY be completed if your child's space has been confirmed by Arbor. It MUST be returned to the school office by Monday 25th September. Without this, your child cannot take part in the club.

Child's Name: _____ Class: _____

I give permission for my child, named above, to take part in the After School Choir Club.

I consent to any medical treatment deemed necessary during the sessions.

Emergency Contact Name: _____ Telephone Number _____

My child has the following medical conditions/allergies (e.g. Asthma)

Signed _____ Print _____ Date _____

Please note that the person completing this permission slip must have parental responsibility.



Diocese of Salisbury
Academy Trust
'Beyond expectations for all of God's children'