



## ACTIVE SCHOOLS ACTIVITY PROGRAMME ACTIVITY BLOCK MAY—JUN 2024



For all Active Schools updates please follow us on Facebook @midlothianactiveschools & Twitter @Active mid



Dear Parent/Carer. The clubs below are **<u>FREE</u>** of charge & are now available to book!

## \*\*\*TRIAL CHANGE TO BOOKING PROCEDURE FOR SCHOOL BASED CLUBS\*\*\*

The school have requested bookings for Active Schools club return to a paper format to try to reach as many pupils as possible—which the school have agreed to manage.

CONSENT FORMS TO BE RETURNED ASAP TO THE SCHOOL OFFICE

A maximum number of participants will be allowed to take part.

Pupils will be notified by class teachers if their child has a space prior to the club starting.

Active Schools sessions at external venues will be advertised via e-flyer by email

| ACTIVE SCHOOLS CLUBS OPEN TO TYNEWATER PRIMARY PUPILS |                       |         |       |                       |              |  |  |
|---|-----------------------|---------|-------|-----------------------|--------------|--|--|
| VENUE   | ΑCTIVITY              | AGE     | DAY   | START DATE            | TIMES        | TICK ONLY IF<br>YOU WISH YOUR<br>CHILD TO AT-<br>TEND & IN THE<br>CORRECT YEAR |  |
| TYNEWATER PS<br>GYM HALL                              | FUN GAMES             | Ρ2      | TUES  | 7TH MAY<br>(3 WEEKS)  | 12.10-12.35  |  |  |
| TYNEWATER PS<br>GYM HALL                              | FUN GAMES             | P1      | TUES  | 28TH MAY<br>(3 WEEKS) | 12.10 –12.35 |  |  |
| TYNEWATER PS<br>GYM HALL                              | YOGA                  | P4 & P5 | WED   | 8TH MAY<br>(3 WEEKS)  | 12.35—13.00  |  |  |
| TYNEWATER PS<br>GYM HALL                              | YOGA                  | Ρ7      | WED   | 29TH MAY<br>(3 WEEKS) | 12.35—13.00  |  |  |
| TYNEWATER PS<br>GYM HALL                              | RACQUET SPORTS        | P1 & P2 | THURS | 9TH MAY<br>(4 WEEKS)  | 12.10—12.35  |  |  |
| TYNEWATER PS<br>GYM HALL                              | RUGBY<br>DALKEITH RFC | P3 - P6 | THURS | 9TH MAY<br>(6 WEEKS)  | 12.35—13.00  |  |  |

Please tick the clubs your child wishes to take part in, complete the consent form overleaf ASAP. Take a note of club information & return to the school office.



## ACTIVITY GUIDE: MAY— JUN 2024



| Please hand t   | his completed form back to scho  | ol office prior to the club starting                   |  |  |  |  |
|---|----------------------------------|--|--|--|--|--|
| PUPIL INFORMATION   |                                  |  |  |  |  |  |
| Pupil Name:   |                                  | School & Class:  |  |  |  |  |
| Home Address:   |                                  |  |  |  |  |  |
|   |                                  |  |  |  |  |  |
| Email address:  |                                  |  |  |  |  |  |
|   | EMERGENCY CONTACT/MEDIC          | AL INFORMATION   |  |  |  |  |
| Name of emergency contact:  |                                  | Relationship to child:                                 |  |  |  |  |
| Home phone:   |                                  | Mobile:  |  |  |  |  |
| All medical information regarding the have limited/no access to school m                                    |                                  | lly detailed below. At certain activities/venues we    |  |  |  |  |
| Please detail any learning/physical disability or medical condition plus any medication in the space below: |                                  |  |  |  |  |  |
|   |                                  |  |  |  |  |  |
|   | GENERAL CONSENT/OTHER            | NFORMATION   |  |  |  |  |
| By completing and returning this fo   |                                  | the named child above to attend the activity/sport     |  |  |  |  |
| session.  | , , ,                            |  |  |  |  |  |
| Please tick & sign:   |                                  |  |  |  |  |  |
| •   | l's photograph/video to be taken | during the session & used for promotional purposes     |  |  |  |  |
| e.g. social media, website etc.   |                                  |  |  |  |  |  |
| Parent/carer Signature:   |                                  | Date:  |  |  |  |  |
|   |                                  |  |  |  |  |  |
|   |                                  |  |  |  |  |  |
|   | Volunteers Wanted                |  |  |  |  |  |
| JOIN  | Could you volunteer some         |  |  |  |  |  |
| THE TEAM  | spare time with Active Sch       | СОАСН  |  |  |  |  |
| THE TERM  | years. Training and suppo        | ctivity sessions for children aged between 5 - 18      |  |  |  |  |
| VOLUNTEER<br>WITH ACTIVE SCHOOLS  |                                  | nools@midlothian.gov.uk                                |  |  |  |  |
| WITH ACTIVE SE  | www.activemidlot                 | hian.org.uk/coaching-or-volunteering,                  |  |  |  |  |
|   |                                  | and shares your personal information, please visit our |  |  |  |  |