



Dear Parent/Guardian

Your child has been invited to a 3 DAY HALF TERM SPORTS CAMP at St John Fisher School, Park Lane, PE15JN on Wednesday 27<sup>th</sup> May, Thursday 28<sup>th</sup> May + Friday 29<sup>th</sup> May 2015. Each day will run from 10am-4pm.

\*\*\*\*\*SPECIAL PRICE.....JUST £30 FOR ALL 3 DAYS.....OR £12.50 PER DAY\*\*\*\*\*

We will be delivering a wide range of sports throughout the 3 days, such as Football, Netball, Athletics, Basketball, Boxercise and Cricket. There will be lots of fun games and competitions to take part in.

Your child will need to wear appropriate clothing for sport activity, shorts or jogging bottoms, T-Shirt, Jumper, trainers, depending on the weather. Children will need to bring a pack lunch.

If you would like to book a space then please fill in the below slip and return with the correct money in one envelope to the main school office ASAP.

If you have any questions or need any further information then please call Luke Kennedy on 07583688413 or email [youthdreamsproject@live.com](mailto:youthdreamsproject@live.com)

Yours faithfully

Luke Kennedy  
***Youth Dreams Project***

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Please return to the School Office

**Half Term Sports Camp**  
**Wednesday 27<sup>th</sup>, Thursday 28<sup>th</sup> + Friday 29<sup>th</sup> May 2015**

Childs/Childrens names: \_\_\_\_\_ Year: \_\_\_\_\_  
Parents name: \_\_\_\_\_  
Emergency contact name and number: \_\_\_\_\_  
Any Medical condition: \_\_\_\_\_

Please indicate which sessions you require:

Wednesday 27<sup>th</sup> May – 10.00-4.00  Thursday 28<sup>th</sup> May – 10.00 -4.00   
Friday 29<sup>th</sup> May – 10.00-4.00

I enclose \_\_\_\_\_ to cover the sessions chosen.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_