



# Leckhampton

C of E Primary School

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Miss S J Porter B Ed (Hons) NPQH

[www.leckhampton.gloucs.sch.uk](http://www.leckhampton.gloucs.sch.uk)

## Teacher-Led Club

Tuesday 9<sup>th</sup> April 2024

Dear Parents/ Carers,

Your child has expressed an interest in attending an athletics club on Mondays after school during the summer term. The club will run from 3.20pm to 4.15pm and is open to children from Years 3 - 6. We will be focusing on a range of athletic disciplines from sprint training, long distance training, relay training and various field events. Sessions will be fun and very active. Children will be expected to be fully engaged, to work hard and be focused on improving their technique at all times. From these four sessions, we will select our Prince of Wales athletics squad for the upcoming competition on Friday 28<sup>th</sup> June. The Prince of Wales squad sessions will take place after half term at the same time.

Monday 15<sup>th</sup> April

Monday 22<sup>nd</sup> April

Monday 29<sup>th</sup> April

Monday 6<sup>th</sup> May (**School closed - Bank Holiday**)

Monday 13<sup>th</sup> May

Monday 20<sup>th</sup> May (**No teacher-led clubs due to Teaching & Learning Week**)

### **Half-term**

#### **Prince of Wales Squad Only:**

Monday 3<sup>rd</sup> June **No teacher-led clubs due to Teaching & Learning Week**

Monday 10<sup>th</sup> June

Monday 17<sup>th</sup> June

Monday 24<sup>th</sup> June

The club will take place on the school field and collection will be from the children's entrance.

Your child will need to wear suitable clothing, they will also need a water bottle. Should the club need to be cancelled due to poor weather, you will be notified by 1pm on the day.

If your child would like to attend, please bring the reply slip to Mr Robinson by **Wednesday 17<sup>th</sup> April**.

Kind regards,

Mr Robinson, Mr Slade and Mr Simpson

open hearts open minds open doors



Year 3 – 6 athletics club : Please return to Mr Robinson

Name of child and class \_\_\_\_\_

I would like my child to attend the club.

Parent/ carer signature: \_\_\_\_\_ Date: \_\_\_\_\_

Emergency contact number: \_\_\_\_\_

Medical needs: \_\_\_\_\_

Going home arrangements: \_\_\_\_\_

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