



LOVEGROVE HOCKEY ACADEMY

Working with Clare House Primary School

Nigel Lovegrove

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22 July 2021

Dear Parents

On behalf of Clare House Primary School, I am writing to inform you that the school will be running a 10-week hockey course (excluding half term) at Clare House for Year 5 and 6 pupils.

The course will begin on **Tuesday 7 September 2021** and the dates are as follows:

September	7, 14, 21, 28	
October	5, 12	Times: 3.20pm to 4.20pm
November	2, 9, 16, 23	Cost of the course: £35

If a session has to be cancelled for any reason an extra session will be added at the end of term.

If you wish your child to attend could you please complete the form below and return to the school office as soon as possible together with your cheque made payable to **Nigel Lovegrove** (*any cash payments please give directly to Nigel*). If you would prefer to arrange a bank payment, please quote **CH followed by your child's full name** using Account Number: 90591424 and Sort Code: 20-06-72.

If payment was made for the spring term and remains in credit, this will be rolled over to the summer term.

Please note, **for the safety of the children** only wooden sticks should be used on the playground. Sticks will be provided but we have a selection for purchase at reasonable prices if your child would like to have their own stick. **Gum shields** are essential and are available to purchase at all sessions at a cost of £3.00.

Lovegrove Hockey Academy also run courses in the evenings and during school holidays for all ages at Hayes Secondary School astro. If you would like more details, please ask for a leaflet or email us at the address above.

If you have any queries or would like any further information on the course, please contact me either by email or telephone.

Yours sincerely

Nigel Lovegrove
Lovegrove Hockey Academy

LOVEGROVE ACADEMY ON BEHALF OF CLARE HOUSE PRIMARY SCHOOL
Hockey Autumn Term 2021 – Year 5 and 6 – Tuesday afternoon

I wish my child _____ Class _____

to attend the hockey course and:

I enclose a cheque for £35 made payable to **NIGEL LOVEGROVE**

I have arranged a bank payment of £35 with payment reference **CH** _____

For bank payments please use Account Number: 90591424, Sort Code: 20-06-72

Your personal data will only be used in the event of any emergency involving your child and for the communication of the term time and holiday courses we offer throughout the school year. By signing this form, you consent to us processing your personal data for this purpose.

Emergency contact no: _____ Medical Conditions: _____

Email address _____ Signed _____ Date _____

You may withdraw your consent at any time by contacting us directly. If you **would not** like to receive details of future term time courses and/or holiday courses by email, please tick here

