



**Hunts School Sports Partnership  
Girls Football Club – Year 3,4,5&6  
Starting Friday 12 January 2024  
At Crosshall Junior School**

Hunts School Sports Partnership  
Hinchbrooke School  
Brampton Road  
Huntingdon  
Cambs PE29 3BN  
Phone: 01480 375700 Extn 5707  
Email: Huntsssp@hinchbk.cambs.sch.uk

Dear Parent / Carer

Your daughter is invited to attend a **FUN** after school Girls Football Club starting on Friday 12 January 2024.

This 6-week course will help the children to develop and extend their core skills such as coordination, agility and balance, and the children will be able to progress individually and at their own pace. Mr Troy Beavis, HSSP qualified Sports Coach will be delivering the sessions.

Our clubs are fully inclusive and accessible to all children at Crosshall Junior School.

Please complete the attached application form and return by email to [hhill@hbk.acesmat.uk](mailto:hhill@hbk.acesmat.uk) marked for the attention of 'Girls Football' Club'. Please **DO NOT** pay until your place has been confirmed.

**It is anticipated that demand for this club will be high so please return the application as soon as possible.**

|               |   |                               |  |
|---------------|---|-------------------------------|--|
| <b>Venue:</b> | Crosshall Junior School                                     |                               |  |
| <b>Dates:</b> | Friday 12, 19, 26 January, 2, 9, 16 February 2024 (6 weeks) |                               |  |
| <b>Time:</b>  | 3.20pm to 4:20pm  |                               |  |
| <b>Fee:</b>   | £4.00 per session – total of £24.00                         | <b>Maximum of 20 Children</b> |  |

Forms to be returned to – [hhill@hbk.acesmat.uk](mailto:hhill@hbk.acesmat.uk) only, **NOT** to the school office. Once you have received confirmation of a place, please make payment as follows:

**BACS payment – Name: ACES Academies Trust, Sort code: 30 94 47, Account: 32872260 please ensure you reference your payment as HSCJSGFSPR1 <child's initial and surname>**

Pupils should wear trainers or astros and appropriate clothing (PE kit). Please bring a bottle of water to the sessions. I hope that your child will take the opportunity to join this FUN activity.

*Helen Hill, Administrator, Hunts School Sports Partnership*



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|  |                |             |  |
|--|----------------|-------------|--|
| Name:  |                |             |  |
| School:  |                | Year Group: |  |
| Emergency contact telephone number:  |                |             |  |
| Email address:   |                |             |  |
| Please state if your child has any medical conditions/additional needs that we should be aware of: |                |             |  |
|  |                |             |  |
| <b>I would like my daughter to attend</b>  |                |             |  |
| My child will be collected from this club:   | By:.....(Name) |             |  |
| Signed:  |                |             |  |

**I give / do not give my consent for my child to be photographed during the activities (these may be used on a website, social media, on newsletters, notice boards etc). Please circle.**