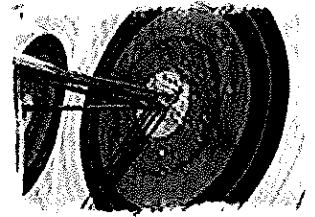


HARRY CROOK YOUTH ACTIVITIES CENTRE

NEW ARCHERY CLASSES

STARTING WEDNESDAY 21st APRIL

5.00pm – 6.00pm



Dear All

We will be starting a new Archery session on Wednesdays from 5.00pm until 6.00pm. The class will be for children aged 8 -12 years old initially.

The sessions will be led by our in house team who work within local primary & Senior Schools as well as running classes across the area for both Adults and Children.

All of our Instructors are CRB checked and cleared and have ample experience and qualifications.

We will be initially be running 5 weeks as a trial period and by the 3rd week will be hopefully attracting sufficient number to sustain this group as yet another activity we offer permanently.

Sessions will take place on the following dates:

Wednesday 21st April, Wednesday 28th April, Wednesday 12th May, Wednesday 19th May and, Wednesday 26th May.

Session costs are **£3.50 per session** however if you book all 5 sessions you will be entitled to a discount and **only pay £15 for all 5 sessions** giving you a **discount of 50p per Session.**

If you are interested and would like to take part in this new exciting activity please complete the attached Consent Form and return to the office asap, places are strictly limited, if we are full we are unable to take anymore bookings.

Any questions please ask any of the Staff Team !

Harry Crook Youth Activities Centre / Skools Out / Kidz Kaos

BOOKING & PARENT/GUARDIAN CONSENT FORM

NOTE: Please complete in **BLOCK** capitals and ensure ALL questions are answered in full.
One application per participant

1 - Dates of Activities: Weds 21st April, Weds 28th April, Weds 12th May, Weds 19th May and, Weds 26th May

2 - Venue: **Harry Crook Youth Activities Centre --Sports Hall**

3 - Particular activity to be undertaken: **Archery Taster Sessions**

4 - Name of participant: Date of Birth

5 - Home address:

6 - Home Telephone Number Emergency contact number:

Medical Information..

7 - Name and address of Family Doctor:

.....Telephone Number:

8 - Date of last Tetanus Injection:

9 - Any Allergies eg antibiotics, elastoplasts, antiseptic cream etc

10 - Any special medical treatment recently received (written medical instructions must be provided):
.....

11 - Any significant medical / personal information (e.g. asthmatic, hay fever, fits, migraine etc):
.....

DECLARATION -

PLEASE USE THE REVERSE OF THIS FORM TO WRITE FURTHER DETAILS

1. I acknowledge receipt of details of the activity to be undertaken and requirements in terms of behaviour, clothing, footwear, food, money etc.
2. I agree that the above participant complies with any special conditions applied to the activity.
3. I agree that the above may participate and that he/she is fit to participate in the activity to be undertaken. I understand that some of these activities may not be club based and I give my authority for he/she to be transported and/or escorted to and from venues by members of the staff team using private and/or public transport.
4. If it becomes necessary for the above named to receive **emergency** dental or medical treatment and I cannot be contacted by telephone on the numbers provided, I hereby give my general consent to any necessary emergency dental / medical treatment being authorised by a representative of Either body named above and for them to sign any documentation required by the dental/hospital authorities.
5. Young People attending this event are considered to be responsible for their own actions and behaviours. You in signing this form are accepting that they will abide by the general spirit and rules of the event. If your child acts outside these rules or the spirit of the event, their involvement will cease and they will be asked to leave immediately. You will be asked to collect them. **NO REFUNDS WILL BE GRANTED.**

Date: Signature:

Name of Parent / Guardian:

Please send this completed booking and consent forms, together with your payment to cover the Activity. Please note that we do not accept cheques. Cash & card are the preferred method of payment.

Gary Woodland
Harry Crook YAC
Moorlands Road
Fishponds
Bristol BS16 3LF.

Note: Places allocated on a first come, first served basis and NO place will be reserved without payment.

PHOTOGRAPHS MAY BE TAKEN & USED FOR FUTURE PUBLICITY BY THE CLUB & ASSOCIATED AGENCIES IF YOU DO NOT WISH YOUR SON/DAUGHTERS PHOTOGRAPHS TO BE USED PLEASE NOTIFY THE CLUB LEADER/MANGER IN WRITING.