



I wish my child to take part in the KL Gymnastics After School Club at North Downs Primary School, **BROCKHAM**

Year 3 – Year 6

TIME – 3.15-4.15

Dates – Friday 21st April – Friday 19th May

Child's Name:

Year Group & Class Name:.....

Emergency Contact Numbers:

E-mail:

Medical/Health Information:

.....

Child collection or any other information:

.....

Parent/Guardian Name:

Signature:

Cost: (5 Sessions - £40.00)

Bank Details:

KL Lennon Sort Code: 01-05-02 Account Number: 36266345

Please enter ref: **KL Gym + child's surname**

***Please email completed forms back to kl_gymnastics@outlook.com ***

Please also wait for confirmation of place once you have returned the form before making payment