Your child(ren) can begin activities when we have received their signed, completed form (subject to availability).
If an activity is oversubscribed, names will be drawn from a hat. The Parents Association will allocate places and notify parents as soon as possible. Activities will begin on the 19th of September.

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| **Please return forms to the teacher on the door, addressed to Parents Association, by Tuesday 13th September** |

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| **Family Name** | **Parent/Guardian Name 1** | **Parent/Guardian Name 2** |
|  |  |  |
| Contact Telephone |  |  |
| Contact E-mail |  |  |

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| **As a parent/guardian, I agree that my children and I have read and will abide by the Code of Conduct.**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Available Activities Term 1 2016** | **Fee** |
| SwimmingFootball Junior/Senior/2/3YogaDramaHip-Hop DanceGymnastics | 1 child: **€40**2 or more children in same activity: **€35** each |

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| **Supervision Requirement** |
| We keep costs low by having parent/guardian supervisors for each activity. **Every family is expected to provide adult supervision at least once per term.** This may be a parent, relative, or child-minder etc. Note: Supervisors must have completed the school’s Garda Vetting Programme. Please check with the school if you are unsure. |

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| **Please fill in your child(s) name, class and activities they would like to attend** |

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| **Child(ren)** | **Activity Name** | **Fee** | **Totals** |
| **Child 1** Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | € | € |
|  | € |
|  | € |
|  | € |

|  |  |  |  |
| --- | --- | --- | --- |
| **Child(ren)** | **Activity Name** | **Fee** | **Totals** |
| **Child 2**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | € | € |
|  | € |
|  | € |
|  | € |

|  |  |  |  |
| --- | --- | --- | --- |
| **Child 3**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | € | € |
|  | € |
|  | € |
|  | € |

|  |  |  |  |
| --- | --- | --- | --- |
| **Child 4**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | € | € |
|  | € |
|  | € |
|  | € |

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| **Grand Total €** |
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| **Payments can be made by cash or cheque to St. Catherine’s NSPA.** Please don’t hesitate to get in touch with the Parents Association should you wish to discuss any aspect of activities in person or via stcatherinesnspa@gmail.com |

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| **Please return forms to the teacher on the door, addressed to Parents Association, by Tuesday 13th September** |