

After School Clubs

Affiliated with Wirral Children's University

Mrs .S. Shaw BA Hons, P.G.C, L.L.A.M, FTCL

07790 336 909

stacey-shaw@live.co.uk

Drama Club

Each workshop has an achievement aim; the class is divided into three sections:

1. **Move and Feel** – Physical work, mime and movement and games
2. **Listen, Speak, Sing** – Poems, songs, tongue twisters, character voices and accent work
3. **Create and Imagine** – Improvisation, character thoughts and imagination exercises

Thursday's for years 1-3 and Friday's for years 4-6
3.30pm-4.30pm

Dance Club

Each workshop has an achievement aim. The classes will incorporate a mixture of dance styles including: Street Dance, Hip Hop and Cheerleading

Thursday's for years 1-3 and Friday's for years 4-6
3.30pm-4.30pm

Keyboard Club

Children will be encouraged to read and play simple sheet music as well as discover that 'keyboards' are FUN! The classes will incorporate: Simple scales, Sight reading, Simple theory tasks and experimenting with different sounds and rhythms!

Thursday's for years 1-3 and Friday's for years 4- 6
12.30pm-1.00pm

- **Drama / Dance Club** cost £15.00 (5 sessions @ £3.00) 28th Feb/1st March – 28th/29th March
- **Keyboard Club** cost £7.50 (5 sessions @ £1.50) 28th Feb/1st March – 28th / 29th March

Payment is to be made via the Tucasi site (be aware that classes book up quickly). Please complete the registration form overleaf in order to secure your child's place.

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Registration Form

Thank you for enrolling your child on the **After School Clubs**. The safety and well being of the children is our top priority. Please take a minute to complete this form and hand it in at the school office.

Clubs (please tick appropriate box/boxes)

Drama (Thursday) Keyboards (Thursday)

Drama (Friday) Keyboards (Friday)

Your Child

Name:	
Gender:	DOB:
School:	School Year:

Parent/Carer

Name:	
Address:	
Phone No:	Mobile No:
Email:	

Other Adults authorised to collect your child

Name:	
Phone No:	Mobile No:

Health and other matters

If your child has any allergies, needs any medication on a permanent basis, has a disability, must not eat particular foods or there are any other factors regarding your child which you think we need to be aware of, please ensure that the details appear below:

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Consent of Parent/Carer to emergency medical treatment

I confirm that the above information is correct and give my consent to any emergency medical treatment necessary during the **After School Club** activities in the event of staff being unable to contact me.

Signed:	Dated:
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