

# FCHS Activity Camp

Run by FCHS P.E, ICT and Art Teachers  
For boys & girls in years 4, 5, 6, 7 and 8



Easter 2012

**Week 1: Mon 2<sup>nd</sup> – Thurs 5<sup>th</sup> April**

**Week 2: Tues 10<sup>th</sup> – Fri 13<sup>th</sup> April**

All sessions run 10am – 3pm daily

Daily rate of £10 per day

**3 activities running each day:**



**Sport**



**ICT**



**ART**

**You can:**

- Select to attend 1 activity for the whole day  
**OR**
- Attend 1 activity in the morning and a different activity in the afternoon

**Limited places, book early!**

**Location** – Finchley Catholic High School, Woodside Lane, Finchley, N12 8TA

**Contact:** 07592545347

**Email:** [activitycamp@finchleycatholic.org.uk](mailto:activitycamp@finchleycatholic.org.uk)

**What to do:** Telephone the number provided on the front of this flyer to check availability, and to reserve a place. Complete the application form and return to our office. Payment can be sent as cash or cheque. Please make payable to Finchley Catholic High School. Write your child's name, address and course details on the back. A place cannot be guaranteed unless it is reserved by telephone. Payment must be received within 7 days of reservation.

If you have reserved your place by telephone and decide not to attend, please ring to cancel so that the place can be reallocated and half of the course fee refunded (up to 7 days before course commences). The course fee is non-returnable unless organisers cancel the course. Participants who withdraw from a course within 7 days of the course commencing are not entitled to a refund other than in exceptional circumstances (e.g. in cases of certified prolonged illness), and that refund would be subject to an administrative charge. The organisers have the right to cancel the course, applicants will be advised, a credit offered, an alternative course arranged or monies refunded.

---

Name of child ..... D.O.B .....

Age ..... Male/Female **Office use only – Date rec'd** .....

Name of Parent/Guardian .....

Address .....

..... Post code .....

Daytime Tel ..... Mobile .....

School attending ..... Email .....

RELEVANT MEDICAL CONDITIONS .....

Please state what MEDICATION if any is being used .....

Do you consent to any emergency first aid treatment that may be required. Yes/No

**Which days will your child attend please circle**

**Week 1:** Mon      Tues      Wed      Thurs

**Week 2:** Tues      Wed      Thurs      Fri

Each day the child will be collected by parent or guardian / make their own way home (please delete as appropriate)

I enclose a fee of £..... Made payable to Finchley Catholic High School (remember your name and address on the back) OR cash. Return to Activity Camp, Finchley Catholic High School, Woodside Lane, Finchley, N12 8TA.

---

Staff running the Sports Camp are thoroughly trained and qualified individuals, committed to providing a safe learning environment. Whilst in our care, participants will be fully supervised. FCHS are under no liability whatsoever in respect to personal injury, loss or damage to property, however caused whilst attending a course. The organisers reserve the right to refuse admission to a course. By signing below, you agree to your son/daughter being able to use the food technology equipment, if you do not wish for them to use this equipment please let us know.

I agree to the conditions as stated – signed Parent / Guardian .....

**Please note:** Photos will be taken during the course for use on the school website / newsletters etc. If you do not wish your child to be photographed please tick this box