



Lightcliffe

ACADEMY



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September Intake Summer School 2018

Wednesday 29th & Thursday 30th August

Useful Information

Venue Address:

Lightcliffe Academy
Stoney Lane
Lightcliffe
HX3 8TL

What should children wear?

Comfortable, non-restrictive clothing & sensible footwear

Should they bring a coat/jacket?

Yes, some activities are outdoors

Should they bring a drink?

Yes, there are water fountains to fill bottles up during the day if needed

Should they bring a packed lunch?

Yes

What method of payment can I use?

We are a cashless school so please pay online via our ParentPay Shop. Visit our website www.lightcliffeacademy.co.uk



Go to our [ParentPay Shop](#), select Summer School and either 'individual days' or the 'saver package' for both days.

If this causes an issue please [contact school](#).

How will I know my child has got a place?

Once you have returned a completed booking form and paid via [ParentPay](#) your place is guaranteed. We can accommodate all students should they wish to attend, however booking is essential for numbers.

Activities

We hope that the activities will give your child a brief introduction to life at Lightcliffe Academy by introducing them to staff, students and the school building. Hopefully, this will make it easier for them in their next stage of schooling in September.

During Summer School, the students will have the opportunity to experience a range of activities that will be led by Lightcliffe Academy staff in a relaxed and enjoyable environment. These activities will cover all the subjects that your child will take part in from September onwards.

Finally, there will be opportunities to make an additional visit to the school and arrange a one-to-one meeting with a senior member of staff at Lightcliffe Academy during the summer break should you have any questions or concerns.

These meetings are only available by appointment. Please email contactus@lightcliffeacademy.co.uk with details of your child's name, their primary school and any concerns. Visits are available during the final two weeks of the holidays (Monday 20th - Friday 31st August 2018 excluding Thursday 23rd). If this is not convenient we will do our best to accommodate you.



Please retain this page for your information

LIGHTCLIFFE ACADEMY
SUMMER SCHOOL BOOKING FORM

Please return your completed form to the school office at Lightcliffe Academy or scan and email to contactus@lightcliffeacademy.co.uk

Child's Name: _____	Age: _____
Date of Birth: _____	Home Address: _____

Post Code : _____	
Current School : _____	

Medical information about your son/daughter

1. Any conditions requiring medical treatment, including medication?

If YES, please give brief details.

2. Is your son/daughter allergic to any medication? If YES, please specify

3. When did your son/daughter last have a tetanus injection? _____

4. Please outline any special dietary requirements/allergies

5. Medical Practice: _____

I will inform the Summer School Leader as soon as possible of any changes in medical or other circumstances should they change before or during the event.

My child is in receipt of Free School Meals Y / N (please circle)

My child is in receipt of Pupil Premium funding Y / N (please circle)

- | | |
|---|--------------------------|
| I consent to images of my child being used on the school website | <input type="checkbox"/> |
| I consent to images of my child being used in internal displays and presentations | <input type="checkbox"/> |
| I consent to images of my child being used in the Principal's Newsletter | <input type="checkbox"/> |
| I consent to images of my child being used on the school's social media platforms | <input type="checkbox"/> |
| I consent to images of my child being used in the external press and media | <input type="checkbox"/> |

If you have any questions about the consent you are giving, please do not hesitate to contact us or go to our Academy website to view the Privacy Notice - www.abbeymat.co.uk/privacy-notices

Contact in case of emergency:

Name: _____ Relationship: _____

Telephone - Work: _____ Home: _____

Mobile: _____ Address: _____

Alternative emergency contact:

Name: _____ Relationship: _____

Telephone - Work: _____ Home: _____

Mobile: _____ Address: _____

I give permission for my son/daughter to make their own way home (please tick)

Signed: _____ Date: _____

Full name (Capitals): _____

Date	Activity	Venue	Time	Cost	Tick to Book
Wednesday 29 th August	Multi Activity	Lightcliffe Academy	8:40am– 3:00pm	£18.00	
Thursday 30 th August	Multi Activity	Lightcliffe Academy	8:40am- 3:00pm	£18.00	
Saver package	Both Wednesday and Thursday for the reduced price of £30			£30.00	