

Rich Little Tennis

Head Coach Bath Tennis Club

Mobile: 07970 438907

Email: rich@richlittletennis.co.uk

 17 March 2023

Dear Parents/Carers

**After school tennis club- Years 1 and 2**

We have had a very enjoyable couple of terms. My coaches and I have been very pleased with the children’s progress. We have 5 coaches in total so we have a very good ratio of coaches to children.

Tennis coaching for Years 1 and 2 will start on Wednesday 3rd May 2023 (3.15pm – 4.20pm) and will finish on Wednesday 5th July 2023.

The cost of this 9 week coaching block is £54. **However, for those children continuing tennis, and who played last term in Classes 1EO, 1G, 2M and 2R, you will get a credit for the week that the children missed due to the Industrial Strike Action. Therefore for those children the cost will be £48.**

The focus for this term will continue to be on basic shape technique and game-related exercises. The school have asked me to note the following information:

**Safeguarding** – The children in KS1 will be collected from the classroom prior to the club. I will bring the children to the gate beside the office when the club finishes to be handed over to parents. Parents are not permitted to wait on the school grounds until the end of the club or enter the hall where the club is taking place.

**To confirm your child’s place, please complete the information on the slip below. Please pay by BACs at the details below by Friday 28th April 2023:**

**Account name: Rich Little Tennis**

**Sort Code: 09-01-28**

**Account No: 81697183**

**Please do not return this slip to the office. Please text, whatsapp or email me (on the above address) by Friday 28th April to let me know if your child will be attending.**

Kind regards,

Rich Little (SCC) LTA Licensed Level 4 Tennis Coach

Head Coach, Bath Tennis Club

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I give permission for ……………………………………….. Class ………………….. Year …………….. to take part in Tennis Coaching.

Emergency contact details: Name ………………………………………… Tel ……………………………………………..

Please advise of any medical condition/treatment ………………………………………………………………………….

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Signed ………………………………………………………………… (Parent/Carer)