

Headteacher:  
Mrs A. Chapman, MA, SFHEA



Founded in 1717

# BAINES SCHOOL

Highcross Road, Poulton-le-Fylde, Lancashire FY6 8BE  
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Web site: [www.baines.lancs.sch](http://www.baines.lancs.sch).

Dear Parent/Carer

February 2019

The PE staff at Baines are holding an Easter Sports School during the first week of the Easter holidays.

## Dates – MONDAY APRIL 8<sup>TH</sup> - FRIDAY APRIL 12<sup>TH</sup> 2019

The activity week will be based on fun where we will engage in a variety of games and activities are designed to make the time as enjoyable as possible. During the mornings students will be coached in a variety of activities. The afternoon will be for games and tournaments with prizes available for all. The main aim of the Easter School is to allow the pupils to learn in a fun and safe environment while enhancing their social development. Games such as Football, Cricket, Hockey, Netball and the **Daily Dodgeball** will all be delivered within our own outstanding sports facilities. It is also a fantastic opportunity for Y6 transition pupils and even younger Y5 pupils to try out our outstanding sporting facilities at Baines while ensuring a smooth transition from primary to secondary education.

*The cost of the camp is £10 daily or £45 for the week. (Cash or Cheques – Cheques made payable to Baines School). Please hand into the school front office.*

**The day will start at 9.30am and finish at 3.00pm daily.**

Pupils will be required to bring a packed lunch.

Please complete the tear-off slip below and return it to the school front office.

Please do not hesitate to contact me if you require any further information.

Yours faithfully

**MR M HARTLEY**

Head of Tomlinson House/PE  
[mha@baines.lancs.sch.uk](mailto:mha@baines.lancs.sch.uk)

To: Mr Hartley, PE Department  
Subject: Easter Sports School - 2019

Pupil's Name: ..... Year (please circle)- 5 / 6 / 7 / 8 / 9

I would like to book the following week(s):-

**Mon APRIL 8<sup>TH</sup> – Fri APRIL 12<sup>TH</sup> 2019** ..... (Please tick)

**Signed:**..... **My contact telephone number is**.....

**Medical Concerns** .....