



PRESENTS

IS IN PARTNERSHIP WITH:

West Sussex Social & Caring Services

WHAT OTHER ACTIVITIES DOES YOUR CHILD ATTEND?

- After School Study Club (Flora School)
- Art Attack
- Blaze
- Breakfast Club (Connaught School)
- Breakfast Club (Flora School)
- The Crew
- Dance Fusion
- Dance Nation
- Glow
- Live Wires
- The MIX
- Summer Soccer School
- Young Carers Workshops

FOR MORE INFORMATION, PLEASE CONTACT US ON:

The WIRE,
The Wickbourne Centre
Clun Road,
Wick, Littlehampton,
West Sussex, BN17 7DZ

The WIRE,
Flora McDonald Junior School,
Whitelea Road,
Wick, Littlehampton,
West Sussex, BN17 7JL

Tel/Fax: 01903 736620

Email: info@thewireproject.com

Tel/Fax: 01903 731796

Email: info@thewireproject.com

You can download this form from The WIRE's website at
www.thewireproject.com



Spurgeon's
child care

The WIRE is a project of Spurgeon's Child Care
Registered Charity No. 1081182
Company Limited by Guarantee in England no. 3990460



Out & About!

Every 2 weeks: 4-6pm
From ONLY 50p

The **CREW** Out & About!

What? The Crew is an after school activity that takes children and young people on outings in the local area. Regular trips include swimming, hiking, bowling, man-hunt and exploring the countryside. There are 6 different groups and each one goes out every 2 weeks

Who? The Crew is for anyone aged between 5 and 16 who needs to get involved in social activities. This could be for a variety of reasons, but the focus is on getting to know each other and having fun.

Where? We will pick you up from home, go on an outing nearby, and drop you home afterwards.

When? Between 4-6pm every 2 weeks during Term-Time, Mondays, Tuesdays or Fridays. From only 50p a session.

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Parental Consent Form

Child's Details

First Name: _____
Surname: _____
Sex: Male/Female Date Of Birth: _____
School: _____

Address

House Number: _____ Street _____
Town: _____
County: _____ Post Code: _____

Parent/Carer Details

Parent/Carer Name: _____
Home Telephone: _____
Mobile Telephone: _____
Email Address: _____

Emergency Details

Emergency Contact Name: _____
Emergency Contact Telephone: _____
Child Medical Details: _____

Doctor/Surgery Name: _____
Doctor/Surgery Telephone: _____

Other info

The WIRE Project may take images of your child during this activity. These images could be used in future publications. Please tick this box if you do not wish us to take images of your children.

The information on this form will be held and used by The WIRE Project only for the purposes it was obtained for. We may wish to send you information about some of our other activities and events. Please tick here if you DO NOT wish to receive such material.

Signed: _____ Print Name: _____
Date: _____

For Office Use Only:

Date Received _____ Staff: _____

PLEASE COMPLETE THIS FORM AND RETURN TO THE WIRE. ADDRESS ON THE BACK!