

Ref: 091/19

19th September 2019

Dear Parent/Carer

As you will be aware, your son/daughter is completing their Level 2 Certificate in Fitness Instructing. The course costs are being covered by St Margaret's in addition to their BTEC Level 3 qualification in Sport & Exercise Science.

The course starts on Friday 20th September 9.30am - 12noon and will run for approximately 16 weeks until February half term when students will be assessed both practically and theoretically.

Venue: Xercise4less

Address: Hunts Cross Shopping Park, Speke Hall Road, Liverpool L24 9GB

Time: 9.30 am -12noon

Dates: Friday 20th September 2019 until Friday 14th February 2020

Students should meet at Xercise4less by 9.15 am and will be registered onsite. They will return to St Margaret's for afternoon lessons after lunch by 1.10 pm. Students should wear practical clothing and bring with them lunch and refreshments for the morning.

As St Margaret's are covering the cost of £250 per student we would ask you to ensure that your son/daughter does not miss any sessions as they are classed as normal school lessons and registered as such. Any students not completing work to standard required, attending all sessions or displaying a lack of focus in or out of school may be removed from the course and will be asked to pay the fees lost.

Please sign and return the permission slip below and return to Mrs Dunne on Friday at Xercise4less.

If you require any further information please do not hesitate to contact me at school or by email ndunne@stmargaretsacademy.com

Yours sincerely

Mrs N. Dunne.

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REPLY SLIP TO: Mrs N. Dunne - Level 2 Certificate in Fitness Instructing

Student: _____ Form: _____

I give/ do not give permission for my son/daughter to attend and complete the Level 2 Certificate in Fitness Instructing at Xercise4less. I understand that my son/daughter will be travelling to and from the venue independently. I also understand that St Margaret's reserve the right to remove students from the course if deemed necessary resulting in possible charges to parents/carers for costs incurred to the school.

Signed: _____ (parent/carers) Date: _____