



Ref: ISB/CIR/15/2017

Date: 27th September, 2017

Dear Parents,

ISB SPORTS ACADEMY (ISBSA) RIFFA CAMPUS

We are pleased to announce the next session of the Sports Academy "**ISBSA**" for 2017-2018. The Academy aims at the all-round development of our students in a fun-way with a fine blend of sporting and other handpicked extra-curricular activities

Please find below the programme for the months of October & November 2017.

ACTIVITY	DAYS	VENUE
Cricket/Badminton/ Taekwondo/ Football	October - Saturday, 14 th 2017 Saturday, 28 th 2017	Ground / Auditorium
Dance/Art/Personality Development	November - Saturday, 11 th 2017 Saturday, 25 th 2017	Music/AV /Dance Rooms/Classrooms Library

Highlights:

* The Sports Academy for the Riffa Campus this year will operate *for the students of Classes I, II and III* on Saturdays, as given above, from 0800 Hrs to 1230 Hrs. However, if for any reason the same does not take place on the proposed day, classes would be compensated on another day.




- * Transport will be available starting from the first bus stop at 7:00 a.m.
- * The fees for the programme is BD. 20/- (BD. 4/- per session inclusive of transport) to be paid by Tuesday, 10th October, 2017.
- * The programme offers 2 sessions of Sports interspersed with 1 session of Dance/Art and Personality development on a rotational basis per session.
- * Students to report to the school reception in the morning.
- * Students must wear the white PT uniform, white PT shoes and the ID card.
- * Please send a substantial snack, water and colour pencils/crayons.
- * Students using private transport may be collected by 12:10 p.m. from the school reception.

Since we have only limited seats, the admission shall be on a *first come first served* basis subject to the timely fee payment for the programme. The decision of the Head of the Academy shall be final and binding on all issues.

Seeking your whole hearted support for the success of this Special Programme.

Kind regards,


Sudhir Krishnan
Principal



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ACKNOWLEDGEMENT

Sports Academy – Riffa Campus

This is to confirm that my child would like to take part in the Sports Academy

Name of the Student: _____ G.R. No: _____ Class & Section: _____

Name of the Parent : _____ Contact telephone No: _____

Bus No. and stop _____

Signature : _____ Date: _____ Receipt No : _____