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| Date: 22.06.2023 |

**Corporate Director: Vicky Schofield**

Crofton Young People’s Centre

High St

Crofton

Wakefield

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Typetalk calls welcome

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**This is your Invitation to our Children in Care Fun Day**

Playworld at Hemsworth Water Park, 3rd August 2023, 10am-3pm

Dear Carer,

We are pleased to announce that the popular Care4Us Fun Days will return on the 3rd August 2023.

Our event is aimed for 0-13year-olds but all children and young people in your household are welcome. If a young person in your household is from another local authority, please let us know.

We encourage you to bring your own food to have a picnic.

At 12-1pm, we are celebrating the efforts and achievements that young people have made over the last year in our Awards Ceremony. Every young person will be presented an award by the Mayor.

We would like you to tell us why **all** the young people who you will be attending with have done well?

This could fall under the following categories:

* Making good choices
* Working hard and doing well
* Giving it a go
* Being kind & helping others
* Sticking with it

Please note: - If these categories don’t seem to fit for your children, then please tell us a reason why we will be celebrating your child at the Fun Days. We want everyone to be celebrated.

To secure your places at this event please complete and return the following sheets in the stamped address envelope by the July 14th to register.

We can’t wait to see you there.

Many Thanks,

Richard Stanley,

Participation Worker for care experienced young people

**Children In Care Fun Days 3rd August Booking Form**

**Carer’s Name**: ………………………………… Tel: …………………………… Email: ………………………………………….

**Any other attending adult’s name**: …………………………………………………………………………………………………...

Any allergies additional support requirements for carers……………………………………………………………………..

**Child 1’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 2’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 3’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 4’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 5’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 6’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

**Child 7’s name:** ……………………………………………………………………… DOB: …………………………………………….

Their Achievement: …………………………………………………………………………………………………………………………..

……………………………………………………………………………………………………………………………………………………………..

Category: …………………………………………………………………………………………………………………………………………..

SW name: …………………………………………………………………………………………………………………………………………..

Any allergies or additional support requirements: …………………………………………………………………………….

Please use additional sheets if necessary for nominations and return in the stamped addressed envelope by post to:

Richard Stanley

County Hall

Bond St

Wakefield

WF1 2QW

Or scan and email your nominations to

BuildOurFutures@wakefield.gov.uk

A nomination form can be downloaded from https://care4us.co.uk/for-our-workers/