|  |  |
| --- | --- |
| NAME OF SCHOOL & TOWN |  |
| SCHOOL EMAIL ADDRESS |  |
| NAME OF FEET FIRST COORDINATOR IN SCHOOL |  |
| COORDINATOR EMAIL & CONTACT DETAILS (IF DIFFERENT FROM SCHOOL) |  |
| CLASS WALLCHARTS (30 rows (pupils names/chart)  WE WOULD LIKE THE PARENT LETTER TEMPLATE? Some schools do not send a letter | No of Wallcharts \_\_\_\_\_\_  YES/NO |
| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | YEAR | Est. No.  OF PUPILS | YEAR | Est. No.  OF PUPILS | | | | NURSERY/  RECEPTION |  | YEAR 4 | **PLEASE COMPLETE FULLY** | | | | YEAR 1 |  | YEAR 5 |  |  |  | | YEAR 2 |  | YEAR 6 |  |  | | YEAR 3 |  |  | **ACTUAL FIGURES WILL GO ON YOUR RESOURCES ORDER -**  **(These figures will be used as a guide on the number of books to order).** | | | | Est. No. of STAFF TAKING PART | | |  | | | | Est. No. of CHILDREN TAKING PART | | |  | | | |  |
| DAY/S OF THE WEEK WE ARE NOMINATING AS OUR FEET FIRST DAY. This may be more than one if you have been taking part for a while and want to increase frequency. |  |
| L:\Integrated Transport Team\ITT PP04 - Active Travel\FEET FIRST\2016-17\logos\Feet Fist Logo.png  **We commit to the scheme and will undertake a 1 day hands-up mode of travel survey.**  NAME  SIGNED  POSITION | |
| **PLEASE RETURN BY FRIDAY 14th SEPTEMBER 2018**  BY POST TO: Nancy Sloan, School Travel Officer, Highways Transport & Fleet, Environment & Community Services Directorate, CCC, Parkhouse Building, Kingmoor Park, Carlisle, CA6 4SJ  Or BY E-MAIL TO: nancy.sloan@cumbria.gov.uk | |