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**HOLIDAY CLUB BOOKING FORM**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Prices | | 08:00-09:00 | 09:00 – 16:30 | 16:30 – 17:30 | Total |
| £5.25 | £29.50 | £5.25 |
|  |  |  |  |  |  |
| Thursday | 18th July |  |  |  |  |
| Friday | 19th July |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Monday | 5th August |  |  |  |  |
| Tuesday | 6th |  |  |  |  |
| Wednesday | 7th |  |  |  |  |
| Thursday | 8th |  |  |  |  |
| Friday | 9th |  |  |  |  |
|  |  |  |  |  |  |
| Monday | 12th August |  |  |  |  |
| Tuesday | 13th |  |  |  |  |
| Wednesday | 14th |  |  |  |  |
| Thursday | 15th |  |  |  |  |
| Friday | 16th |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | | |
| Total cost |  |  |  |  |  |
| 20 % deposit |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Child’s Full Name:** |  | | **Date of Birth:** | | | | |  | | |
| **Home Address:** |  | | | | | | | | | |
| **Post Code:** |  | | **Tel. No. Home:** | | | | |  | | |
| **Mother’s full name:** |  | | | | | | | | | |
| **Mobile Number:** |  | | | **Emergency No:** | | |  | | | |
| **Alternative emergency contact:** | |  | | | | | | | | |
| **Mobile Number:** |  | | | **Other No:** | | |  | | | |
| **Doctor’s Name:** |  | | | **Telephone No.:** | | |  | | | |
| **Address:** |  | | | | | | | | | |
| Does your child have any allergies? | | | | | Yes | 🞏 | | | No | 🞏 |
| If yes, please give details: | | | | | | | | | | |
| Does your child have long-term medical needs? | | | | | Yes | 🞏 | | | No | 🞏 |
| If yes, please give details: | | | | | | | | | | |
| Does your child have any additional educational needs? | | | | | Yes | 🞏 | | | No | 🞏 |
| Do you consent to your child’s photograph being taken and used for advertising purposes? | | | | | Yes | 🞏 | | | No | 🞏 |
| If yes, please give details: | | | | | | | | | | |
|  | | | | | | | | | | |
| Is there any other relevant information we should know about your child? If so, please give details: | | | | | | | | | | |
| N.B. Children are required to bring each day:   * Outdoor Waterproof Clothing and wellies (we have suits for 2-5 year olds) * A packed lunch * A full change of clothes * Slippers for indoors * **Suncream must be provided and applied BEFORE start of day** | | | | | | | | | | |

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| --- | --- | --- |
| **Term and conditions:** | | Please initial |
| 1 | 20% non refundable deposit is required upon booking. Each holiday period can be booked separately.  Bank transfers: TSB Bank plc Sort code: 77-67-15 Acc No: 23390668 Ref: HC and child’s name. Cheques payable to: Dawn Barlow |  |
| 2 | Balance required 2 weeks before start of the holiday period. Cancellation after this time is non-refundable. |  |
| 3 | All Bridgemont Nursery Policies and Procedures apply during holiday club sessions. |  |

Parent signature: ............................................................... Date: ..........................................