

## **Chew Stoke Out of School Club**

## **BOOKING FORM:**Summer Holiday Child Care 2024

I would like the Chew Stoke Primary School "Out of School "Club to look after my child/children on the dates indicated below. I agree to abide by the written policies and procedures of Chew Stoke "Out of School" Club.

| Name of Co<br>(Where more                 |   | please fill out a se                                     | eparate form for each ch   | ld)  |   |
|---|---|--|--|--|---|
| Date of Birth                             | :   |  |  |  |   |
|   |   | 5pm and will in  | nclude mid-morning<br>H EACH DAY   | and mid-afternoor  | า drink + snack   |
|   | Day   | w/c<br>22 July   | w/c<br>29 July   | w/c<br>5 August  | w/c<br>12 August  |
|   | Monday  | Х  |  |  |   |
|   | Tuesday   | х  |  |  |   |
|   | Weds  |  |  |  |   |
|   | Thursday  |  |  |  |   |
|   | Friday  |  |  |  |   |
|   |   | over 12 years  |  | o provide places   | for children who are  |
| day places<br>5pm) will b<br>a further co | ild per day.  If places a  of offered ur  ost of £10 ea  NON-REFU | are still availab<br>ntil 23rd July. I<br>ach end of the | ole after 19 <sup>th</sup> July ha<br>Extended hours are<br>day.  Please ask c | alf day places at<br>e available from 8<br>ub staff for deta | uly 2024 to guarantee ful<br>£23 (9am-1pm OR 1pm-<br>Bam to 6pm if required at<br>ils. PLEASE NOTE THAT<br>LED DUE TO LACK OF |
| Signed Par                                | rent/Carer:   |  |  | Date   |   |
| Fees, Bookin                              | ng and Paymer<br>be made for the o                                | nt Terms (* delete<br>days required in adv               | e as appropriate)<br>ance at the time of booking                               |  |   |

A registration form for CSOOSC must be completed for each child, a registration fee paid (£5) and payment received before bookings can

PLEASE RETURN COMPLETED FORM, WITH PAYMENT, BY Friday 19th JULY

Cheques to be made payable to 'Chew Stoke Out Of School Club'

be accepted.

Holiday Club Registration Form (Where more than one child, please fill out a separate form for each child)

| I would like the Chew Stoke Primary School "Out of School "Club to look after my child/children on t following dates:  |
|--|
|  |
| I agree to abide by the written policies and procedures of Chew Stoke "Out of School" Club.  |
| Name of Child<br>Date of Birth:  |
| Name of Parent :   |
| Contact telephone number:  |
| Emergency Contact name (in case parent can not be contacted): Emergency Telephone number)  |
| Family Doctor:Phone number:  |
| Name of person collecting your child if other than parent named above:   |
| *I do/ do not consent to my child(full name) bein taken on outings to local places of interest within walking distance of the School as long as they are accompanied by CSOOSC staff at all times. |
| *I do/ do not consent to my child being given sun protection cream and plasters to apply if required   |
| In the case of an accident I give consent for my child to undergo emergency medical treatment by qualified medical staff *yes/ no  |
| Does your child suffer from any allergies / medical conditions of which holiday club staff should be aware? Yes/ No* If 'Yes' please give details below (and back of form if necessary):           |
|  |
|  |
|  |
|  |
| Signed Parent/Carer: Date  |