**February Holiday Club Monday 17th February - Friday 21st February 2020**

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| Child’s Name: | Date of Birth: | | |
| Address: | School Attended:  Is your child in reception/foundation stage? Yes\*/No | | |
| Child’s Ethnic Origin: | | | |
| First Emergency Contact Name:  Relationship to child: | Home phone:  Work phone:  Mobile: | | |
| Second Emergency Contact Name:  Relationship to child: | Home phone:  Work phone:  Mobile: | | |
| We need to know who is collecting your child at the end of the session. If this changes during the day, please provide a password that the other responsible adult would have to use: | | | |
| Name and telephone number of child’s doctor: | Details of any special educational needs, allergies or cultural preferences that we should be aware of: | | |
| Are there any other professionals involved in the care of your child, including social workers, speech therapists etc? | | | |
| **Permissions** - Please tick yes or no for each | | Yes | No |
| I agree to my child receiving medical treatment in case of a serious accident | |  |  |
| I give permission for my child to be photographed (for use in the Go Play photo album) | |  |  |
| If answered yes above, I give permission for these photos to be used on our Facebook page and website | |  |  |
| I give permission for my child to have face/body paints | |  |  |
| I give permission for my child to have their hair braided | |  |  |
| I give permission for my child to have their nails painted | |  |  |
| I give permission for my child to have temporary tattoos | |  |  |
| I give permission for my child to watch U and PG rated films | |  |  |
| Signed: Date: | | | |

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| **How did you find out about us?** |  |
| **If you would like to go on our mailing list to receive the latest booking forms please give your email address.** |  |

**Please tick all the sessions you wish your child to attend. A list of activities and lunches will be available on our website and a print out at the holiday club.**

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|  | **Morning**  **9:30am-12:00pm** | **Lunch**  **12pm-1pm** | **Afternoon**  **1pm-3:30pm** | **Full Day**  **9:30am-3:30pm** | **Extended Day**  **8:30am-5:30pm** |
| **Monday 17th** |  |  |  |  |  |
| **Tuesday 18th** |  |  |  |  |  |
| **Wednesday 19th** |  |  |  |  |  |
| **Thursday 20th** |  |  |  |  |  |
| **Friday 21st** |  |  |  |  |  |

**Prices**

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| **Session** | **First Child** | | **Additional Siblings** |
| Morning 9.30am–12pm | £5.50 | | £4.50 |
| Lunch 12pm-1pm | All children - £1 | | |
| Afternoon 1pm–3.30pm | £5.50 | | £4.50 |
| Full Day 9:30am-3.30pm | £12 | | £10 |
| Extended Day 8:30am-5:30pm | £18 | | £16 |
| **Please Note**   * Booking is advisable for the Morning, Lunch, and Afternoon sessions but not compulsory. * **Extended Day sessions must be pre-booked and pre-paid at least a day in advance.** * **We are now providing lunch every day,** but feel free to pack your own lunch if you would prefer.We will provide snack throughout the day. If your child would like to eat our lunch then please let us know any dietary requirements before their first day so we can cater for them. * All activities are subject to change, especially those that are weather dependent. * Please see separate information sheet for the week’s activities and lunches.   **Contact Details**  Phone: 07555189597  Email: [manager](mailto:scwccp@hotmail.com)@goplay.org.uk  Location: Oak Green School, Aylesbury, HP21 8LJ  Website: [www.goplay.org.uk](http://www.goplay.org.uk) | | **Payment**  Payment can be made by cash, cheque or online using the details below. Please put the reference number as PS followed by your child's initials and house number. Please record the reference number below.  **Sort Code:** 30-90-38  **Account number:** 02940658   |  |  | | --- | --- | | **Payment Reference** |  | | | |