Contact details Name:
Address
Email
Tel:
I would like to book places for the following people Names of adults
1
2
3
4
Name and ages of children (Maximum of 4 children per adult)
1
2
3
4
Please list any dietary requirements or food allergies
Are there any medical conditions or special needs for either children or adults
Does anyone have a latex allergy Yes/No If yes who

Days and fee

Day	Number of Adults	Number of Children	Number of children	Totals £
	@ £2 per adult, per	@ £2 per child, per	under 4 (Free)	
	day	day		
Tuesday 25 th July				£
Wednesday 26 th				£
Thursday 27 th July				£
Friday 28 th July				£
Total hooking fee			f	

Please enclose money with booking form

Continued over leaf

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Only official photographs will be allowed to be taken.

We understand that some people may not want photographs of either themselves or their children taken. Please let us know at registration if this applies to you.

Yes I am happy for photographs to be taken

No I do not want photographs taken

Please delete as appropriate

Undertaking

I understand that any children that I bring along cannot be left unaccompanied and that I remain responsible for them for the duration of the club.

Our safeguarding policy is available.

Signed	Date
JISTICA	The state of the s

Please return this form and your fee to the school office as soon as possible. We advise early booking as spaces will be limited.

For Coordinator use only		
Special requirements	Yes/No	
Booking form checked	Yes/No date	
Fee received	Yes/No	
Booking confirmation sent	Phone/Text/Email date	