**HOLIDAY ENRICHMENT BOOKING FORM**

**A SEPERATE FORM MUST BE COMPLETED FOR EACH FAMILY MEMBER ATTENDING**

**NAME OF CHILD** ………………………………………………………………………………………………………………..

**D.O.B**. ……………………………………

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Tick to confirm your selection | | | | | |
|  | Full week | Monday | Tuesday | Wednesday | Thursday | Friday |
| Week 1 - week beginning 25th July - Sports and craft themed week. |  |  |  |  |  |  |
| Week 2 - week beginning 1st August - Robotics themed week working with STEM company. |  |  |  |  |  |  |
| Week 3 - week beginning 8th August - Sports and craft themed week. |  |  |  |  |  |  |
| Week 4 - week beginning 15th August - Party week. |  |  |  |  |  |  |
| Week 5 - week beginning 22nd August - Sports and craft themed week. |  |  |  |  |  |  |

**Amount owed: £\_\_\_\_\_\_\_\_\_\_\_\_\_**

**METHOD OF PAYMENT**

Payment must be received at the time of booking. Please indicate which payment method you will be using below. Your child’s name should be used as the reference if paying by BACs or childcare vouchers.

BACs

CASH

CHILDCARE VOUCHERS (Edenred, Sodexo, Care4, Computershare, Kiddivouchers)

**The cost is £30 a day or a full week, £125**

**Bank Details:** Fernhurst Primary School, University of Chichester (Multi) Academy Trust

Sort code: 60-03-08 Account number: 74220578

**CHILD’S DETAILS**

School:…………………………………………………………………………………………………………Year:……………………………..

Doctor, address and telephone number of surgery:

……………………………………………………………………………………………………………………………………………………………

…………………………………………………………………………………………………………………………………………………………..

**Parent / Carers Name:** ………………………………………………………………………………………………………………………..

Address:………………………………………………………………………………………………………………………………………………

……………………………………………………………………………………………………………………………………………………………

Mobile number: ……………………………………………Home or work number ……………………………………………..

Email address…………………………………………………………………………………………………………………………………….

**EMERGENCY CONTACTS AND PERSONS AUTHORISED TO COLLECT YOUR CHILD**

Person’s name: ………………………………………………………….Relationship to child ………………………………………

Mobile number: ……………………………………………Home or Work number ……………………………………………..

Person’s name: ………………………………………………………….Relationship to child ………………………………………

Mobile number: ……………………………………………Home or Work number ……………………………………………..

* If your child has a severe medical condition or allergy, you must provide a photograph of your child with this booking form.
* If your child has Asthma and requires an inhaler you MUST provide the inhaler in its original box with the prescription label.
* If your child requires an EPIPEN you MUST provide two in the original packaging showing the prescription label. A Care Plan MUST be put in place BEFORE your child attends (a member of Fernhurst Primay School staff will contact you prior to the summer holiday).
* All medication should be handed to a member of staff on arrival each morning.

**Any relevant medical/SEN/cultural/dietary/allergy information we should be aware of:**

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**Medication that your children will bring with them:**………….:……………………………………………………………..

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**PHOTOGRAPHY AND SOCIAL MEDIA PERMISSIONS**

I give permission my child’s photograph to be taken whilst attending the Holiday Enrichments and for their image to be used on Fernhurst Primary School’s social media account (Facebook), the school website and the University of Chichester (Multi) Academy Trust’s website.

**Yes**

**No**

**Please Note (disclaimers):**

* Numbers are limited and priority will be given to booking on a first come first served basis.
* Minimum numbers are required to run some activities. We reserve the right to offer alternatives for cancelled activities or to change the programme at anytime.
* All enrichments run 9am to 3pm, children should be dropped off and collected promptly.
* No refunds will be given for cancelled bookings, however, we will try and move your booking subject to availability and two weeks’ notice, please email [bookings@fernhurst.w-sussex.sch.uk](mailto:bookings@fernhurst.w-sussex.sch.uk).
* Children with a temperature, cough or loss of, or change in, sense of smell or taste must not be brought onto school premises and should take a PCR test prior to returning. Children who become ill during the day will need to be collected promptly.
* Payment must be made at the time of booking to secure your child’s place.
* Fernhurst Primary School is a nut-free zone. Children must not bring any nut products into the school, including Nutella and hands creams, which contain nut oils.

**I agree to the above disclaimers and permissions:**

Parent/Guardian Signature:.......................................................................................Date…………………

|  |  |
| --- | --- |
| **OFFICE USE ONLY** | |
| **Places confirmed** |  |
| **Money received** |  |

**Please send this form to our dedicated Summer Enrichment email address:** [**bookings@fernhurst.w-sussex.sch.uk**](mailto:bookings@fernhurst.w-sussex.sch.uk) **or return to the school office.**