

BOOKING FORM FOR SUMMER FUN 2017



PLEASE CIRCLE THE DAYS YOU WOULD LIKE TO BOOK.

FIRST NAME:

SURNAME:

GENDER: M / F

ADDRESS:

POSTCODE:

HOME TEL:

MOBILE:

E-MAIL:

AGE:

D.O.B:

CONSENT: I consent to my child taking part in Summer Fun 2017. I acknowledge that the programme will on most days be located at sites away from the base. I agree to complete a medical form for my child including as much information as possible.

****Please send this form back by TUESDAY 4TH July 2017.****

After this date we will try our best to offer places if they are available.

NAME:

SIGNATURE:

DATE:

No refunds will be given for late cancellations.

| WEEK ONE | | TUESDAY 8TH AUGUST | WEDNESDAY 9TH AUGUST | THURSDAY 10TH AUGUST | FRIDAY 11TH AUGUST |
|-----------------------------------|--------------------|------------------------------------|-----------------------|--------------------------|--------------------|
| | NO SUMMER FUN | Go Karting | Bowling | Mini Golf | Trampoline Park |
| 10 am until 4pm | | 13-17 years old | 13-17 years old | 13-17 years old | 8-14 years old |
| WEEK TWO | MONDAY 14TH AUGUST | TUESDAY 15TH AUGUST | WEDNESDAY 16TH AUGUST | THURSDAY 17TH AUGUST | FRIDAY 18TH AUGUST |
| | Swimming | Hounslow Toy Library | Caving and Maze | Seaside Trip *10am-7pm* | Bocketts Farm |
| 10 am until 4pm (Except Thursday) | 13-17 years old | 8-14 years old | 13-17 years old | 13-17 years old | 8-14 years old |
| WEEK THREE | MONDAY 21st AUGUST | TUESDAY 22nd AUGUST | WEDNESDAY 23rd AUGUST | THURSDAY 24TH AUGUST | FRIDAY 25TH AUGUST |
| | Companion Cycling | Thames Valley Adventure Playground | Climbing Wall | Whipsnade Zoo *10am-7pm* | Archery |
| 10 am until 4pm (Except Thursday) | 8-14 years old | 8-15 years old | 13-17 years old | 13-17 years old | 13-17 years old |

Please circle the activities you would like to book.

IMPORTANT: Please return your booking form by 4TH July 2017

After this date we will try our best to offer places if they are available



Child and family information sharing consent form

This form is for parents to identify which organisations they consent to share information relevant to organising the appropriate care and support of their child during 2017 short breaks summer scheme.

Child's name.....

Parents signature.....Date.....

| | | | |
|-------------------------------------|--------|--|--------|
| | Mencap | | Other: |
| Crofters can share information with | | | |

| | | | |
|-----------------------------------|--|----------|--------|
| | | Crofters | Other: |
| Mencap can share information with | | | |

| | | | |
|--|--------|----------|--|
| | Mencap | Crofters | |
| Other: _____ can share information with | | | |