

Booking Form 2021

One form per child
Please complete BOTH pages

Name	Date of Birth
.....
Address	
.....	
.....	
School Attends	
.....	
Home Tel.	Mobile
.....
Contact Name	
.....	

**EMERGENCY
TELEPHONE NUMBER
AND NAME**

.....

.....

(ESSENTIAL)

An adult must **always**
be available in case of
emergency.

T-Shirt Size

S (5-6) M (7-8) L (9-10) XL (11-12)

A Registration for Morning Sessions Monday - Friday
9:30am - 12:30pm

Cost £40.00 per child (£45.00 after 15.07.2021)
£37.50 concessions (In receipt of benefits - proof required) £40.00 after 15.07.2021

Total £

B Sports Workshop - Afternoon Sessions Monday - Thursday
1pm - 3pm

Cost £10.00 per session **£35.00** for 4 sessions

We are unable to offer 1:1 support for the afternoon sessions

Select date (tick) Mon Tues Wed Thurs

Total £

C Dance Workshop - Afternoon Sessions Monday - Thursday
1pm - 3pm

Cost £10.00 per session **£35.00** for 4 sessions

We are unable to offer 1:1 support for the afternoon sessions

Select date (tick) Mon Tues Wed Thurs

Total £

A+B+C = Total to Pay **GRAND TOTAL**

£

Please send all applications to:
Alison Johnston, 2 Grebe Close, Barrow Upon Soar Leics. LE12 8YB with cash or a cheque made payable to Boscaps (no online applications).

FOR OFFICE USE ONLY

Authorised/Checked by: Receipt No.:

Cash: Cheque: Cheque No. (if applicable):

My child will be collected by (name)

.....

I agree to my child having photographs taken

YES NO

.....

I agree to my child walking home on their own

YES NO

Please give name

If these details change or if you have arranged for someone else to collect your child you must notify us in writing.

Medical Information (ESSENTIAL) - Please complete all details below

Name of Doctor **Telephone Number (ESSENTIAL)**

Address of Doctor

Name of Child **Medical Condition**

Bubbles

We hope that Boscaps will run as normal this year. However we have to be prepared to follow Covid guidelines.

Please could you indicate below where you would like your child to go should we need to make 'bubbles'. This is just so we can make your child experience as enjoyable and safe as possible.

Morning Sessions

Sport Art Dance

Afternoon Sessions

Sport Dance

Parent / Guardian Consent

• I understand that whilst every care and attention will be given to my child, BOSCAPS cannot accept responsibility for personal loss/ damage to personal property.

• I give my permission for my child/children to participate in the playscheme and for any necessary first aid treatment to be given. **This includes any trips booked.**

Signature of Parent / Legal Guardian **Name (Print)** **Date**

Relationship to child

Does your Child need extra support? YES NO

Does your Child get extra support at school? YES NO

If 'YES' please complete the Form **Boscaps SEND Details** and send with your registration form