

Castle House Holiday Care



Fun in the Holidays

Booking Form

Child's/Children's Name(s): Date(s) of Birth:

Weeks required: w/b Monday

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Write in this box the dates of the Mondays of all weeks for which you require the sessions listed below, eg w/b Monday 15 August. Use a separate form for weeks in which you require different session times.

Sessions – Tick required								Cost per one week	Total payable for wks
	Times	Price	Mon	Tues	Wed	Thurs	Fri		
Q	9.00-5.00	£23.00							
R	8.00-4.00	£23.00							
S	9.00-6.00	£24.00							
T	8.00-5.00	£24.00							
U	8.00-6.00	£25.00							
V	9.00-4.00	£22.00							
W	8.00-1.00	£12.50							
X	9.00-1.00	£11.50							
Y	1.00-5.00	£11.50							
Z	1.00-6.00	£12.50							
Additional single hours		£3.00							
Total									
10% Discount if booking a minimum of 25 hours in a week (Monday to Friday)									
TOTAL								£	

I/We wish to apply for admission of my child to Castle House Holiday Care. I have received and read the Terms and Conditions and agree to comply with them.

I/We understand that from time to time C_{HH}C will take the children off site for educational or recreational visits. I/We give our consent to such activities in the event that a consent form for each occasion is not received and signed by us prior to such activity. (delete if not)

From time to time, the school publishes names and photographs of children in the press, either to celebrate achievements, or for publicity purposes. I/We give our consent to such publicity. (delete if not)

I confirm that the information given by me and recorded on this form is to the best of my knowledge, accurate and true. I agree to notify any changes to the above information as soon as they occur.

I enclose payment of £ cheque/cash. Cheques payable to "Castle House School Trust Limited"

Signed:
Parent/Guardian

Date: