

Christians Together In Elmswell

"I give permission for the child named overleaf to take part in the activities associated with Holiday Club. In an emergency, I authorise the leader(s) of the event to administer first aid and appropriate medication and to sign on my behalf any written form of consent required by medical authorities, if the delay required to obtain my signature is considered unnecessary or inadvisable by the doctor or surgeon concerned."

Signed Date

Parent/Carer name

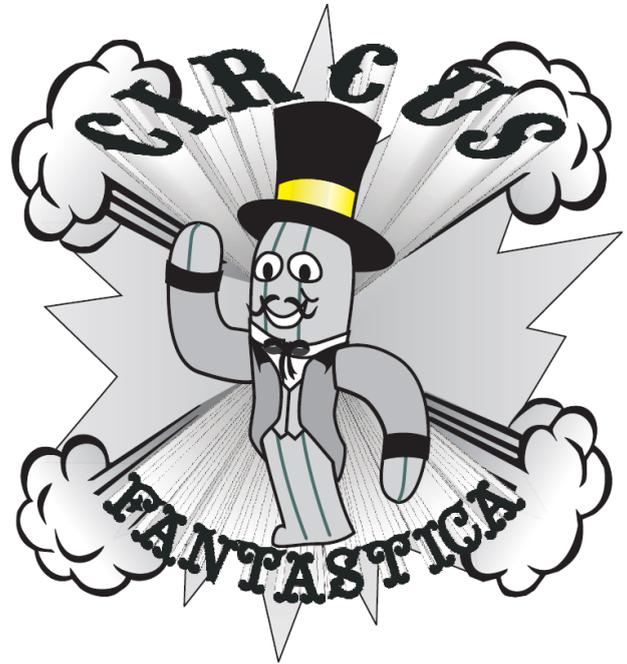
Relationship to child

All Information given will be treated in the strictest confidence and only used if absolutely necessary.

We would like to use photographs of the event to be shown as part of a video montage during the week and afterwards in Elmswell churches only. Please indicate if you do NOT wish any photographs of your child to be used for this purpose.

Please enclose payment of £12.50 (max £25 per family)

Cheques should be made payable to
Elmswell Churches Children's Holiday Club



Summer Holiday Club

Mon 17 - Fri 21 August 2015

9:20am - 12:30pm

£12.50 per child

CIRCUS FANTASTICA is the name for this year's holiday club - 5 mornings of fun activities, crafts, games, drama and Bible teaching from 17 to 21 August.

It is for children in school years Reception to Year 6 and is held at The Blackbourne. Registration will be from 9.20am and the morning's activities finish at 12:30pm.

Please complete one booking form per child & return with your payment of £12.50 (max £25 per family). Please make any cheques payable to "Elmswell Churches Children's Holiday Club."

Return forms to either:

**Jackie Hull
Holiday Club 2015
4 Whatley Close
Elmswell IP30 9GJ**

Or

At the **Holiday Club stall** in the Elmswell Primary School Playground at the end of the summer term.

If you have any questions or enquiries, please call Jackie Hull on 01359 245918 or email jackieph126@gmail.com

Booking forms also downloadable from www.stjohnselmswell.org.uk

Christians Together In Elmswell



Holiday Club 2015 Booking & Medical Form

Child's Name Male/Female

Date of Birth Current School Year.....

Address

.....
.....
.....

Parent/Carer name.....

Email address:.....

We would like to keep the above information on our database so we can invite your child to future events. This will help with our administration and ensure your child does not miss out. We will NOT pass any information onto any other organisation. If you do NOT wish us to contact you with information on future events for children please tick here

Telephone number.....

Emergency contact name.....

Emergency contact number.....

Any medical / special needs (including medicines taken & dietary requirements)

.....
.....
.....

Form continued overleaf