

SPORTS CAMP BOOKING FORM

The easiest method of booking is on www.phys-kids.co.uk. If you would prefer to pay by cash or cheque, please fill in the form and send it to the address below (cheques payable to PHYS-KIDS LTD). £20per day, Pay full price for one child, brothers and sisters are half price (t & Cs apply). Children must be 6yrs old to attend.

CHILDS NAME..... D.O.B.....E MAIL.....

ADDRESS.....

.....POSTCODE.....

HOME TEL. NO..... SCHOOL ATTENDED.....

MEDICALCONDITIONS.....

.....MEDICATION REQUIRED.....

CHILDCARE VOUCHER REFERENCE (IF APPLICABLE).....

IN CASE OF EMERGENCY, PLEASE CONTACT: NAME.....

TEL.NO.....

My child will be attending on the following dates (please tick): OCT HALF TERM

MON		TUES		WED		THURS		FRI		ALL 5	
29.10.18		30.10.18		31.10.18		01.11.18		02.11.18		DAYS	

I HAVE ENCLOSED A CHEQUE FOR £.....

I WILL BE COLLECTING MY CHILD AT 4PM: YES/NO

I GIVE PERMISSION FOR MY CHILD TO WALK HOME UNACCOMPANIED: YES/NO

I HAVE PAID £4 EXTRA PER DAY AND I WILL BE COLLECTING MY CHILD BETWEEN 4 & 6PM YES/NO

I GIVE CONSENT FOR MY CHILD TO GO SWIMMING (Tudor grange camp) YES/NO (OVER 8YRS ONLY)

I UNDERSTAND THAT ANY SERIOUS VIOLATION OF PHYS-KIDS REGULATION THAT IS DEEMED TO BE DETRIMENTAL TO THE CAMP WILL RESULT IN MY CHILDS EXPULSION. BOOKINGS ARE NON REFUNDABLE AND NON TRANSFERABLE UNLESS A WRITTEN CANCELLATION REQUEST IS RECEIVED BY PHYS-KIDS BEFORE 5PM ON THE FRIDAY BEFORE THE COMENCEMENT OF THE CAMP. I AGREE TO PROVIDE MY CHILD WITH A PACKED LUNCH AND ENSURE THAT THEY ATTEND WEARING APPROPRIATE SPORTS WEAR. I CERTIFY THAT MY CHILD IS IN GOOD HEALTH AND CAN PARTICIPATE IN THE DAILY ACTIVITY OF A SPORTS CAMP. IN CASE OF EMERGENCY, I GRANT PERMISSION FOR MY CHILD TO BE GIVEN FIRST AID/OR TREATMENT AT A HOSPITAL BY COMPLETING THIS FORM I AGREE TO ADHERE TO THE TERMS AND CONDITIONS OF THE BOOKING. FULL TERMS AND CONDITIONS CAN BE FOUND ON www.phys-kids.co.uk

SIGNED (PARENT/GUARDIAN).....

DATE.....

PLEASE SEND BOOKING FORMS AND CHEQUES TO: 3 MEREVALE RD, SOLIHULL B92 8LA