|  |  |  |
| --- | --- | --- |
| 2 | |  | | --- | | **Autumn Half Term 2019 Holiday Club Booking Form** | |

Child(s) Full Name ……………………………………………… Date(s) of Birth ………………………………………………

Address ………………………………………………………………………………………………………………………………………………………………

Post Code ………………………………… Email Address ………………………………………………………………………………

Contact Telephone Nos. ……………………………………………………………

Mobile Nos. …………………………………………………………………

Please tick the boxes below, which correspond to the days you wish your child to attend.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Monday 28th October | Tuesday 29th October | Wednesday 30th October | Thursday 31st October | Friday 1st November |
|  |  |  |  |  |

**Cancellation Charges**

More than 24 hours notice 50% for each day ~ Less than 24 hours notice 100% for each day

~Booked days will be charged in full i.e. you cannot exchange days

All Sections **MUST** be Completed and Signed

Print Name(s) …………………………………………………………………………………………………………………………..…..

Sign for Parental Responsibility / Legal Responsibility ……………………..………………………………………………

Signed (Parent/Guardian) ………….……….……………………………………………………………………………...……………

Date ………………………………………….………….…………….…….….….……….

**Full day rate £25.00**

**10% sibling discount**

**Half day rate £15.00**

**(8am to 1pm or 1pm to 6pm)**

**Late booking £30.00 (within 48hrs of the day)**

**PLEASE RETURN THE COMPLETED COPY WITH THE CORRECT REMITTANCE TO CHERUBS & IMPS**

**Cherubs and Imps Limited Terms and Conditions Apply**