

Our Pride, Our Joy Ltd





February Half Term Holiday Club

Dear Parents

Care Club will be open February half term as follows: **Monday 21**st **February**— **Friday 25**th **February** from either 8am - 6pm or 9am-3pm for children aged 3-11years (we will be only opening for one of these times so you may be asked to change if there is a greater need for a particular session in order for us to open). The Care Club will be based at **Dosthill Primary School**.

We will be offering a fantastic fun packed week of activities relating to Springtime. Other activities will include arts & crafts, sports games, team building, Lego, Hama beads, loom bands, wii consoles and much more!

Breakfast and a light snack is provided ONLY with the 8am-6pm session this will not be available for the 9am-3pm session but all children will require a packed lunch and a named drink. Please send warm outdoor, waterproof clothing and wellies.

Please return Booking forms by FRIDAY 4TH FEBRUARY

Confirmation of sessions will be sent with the invoices on the 7th and payment will be due by the 14th February.

Please also be aware that sessions may be cancelled or changed if numbers are not high enough to make viable.

Please note if your child is not a regular member of the club then an emergency contact form must be completed and handed in with the booking form.

Opening Times:

Session 1: 8 am – 6 pm Cost: £26.00 per day.

or

Session 2: 9am-3pm £15.00 per day.

which School do you currently attend?
Parents Name:
Contact Number:
Contact Email:
Childs/Children's Name:
Child's age:

Please circle your r	equired sessions			
Monday 21st Feb	Tuesday 22nd Feb	Wednesday 23 rd Feb	Thursday 24 th Feb	Friday 25 th Feb
Session1- 8am- 6pm	Session1- 8am-6pm	Session1- 8am-6pm	Session1- 8am-6pm	Session1- 8am-6pm
Session 2 -9am- 3pm	Session 2- 9am- 3pm	Session2- 9am- 3pm	Session2- 9am- 3pm	Session2- 9am- 3pm
Additional informa	tion		1	

Should you require any further information about the holiday club please email Loren on ltaft@opoj.fierte.org.

Please note this booking form needs to be sent to <u>LTaft@opoj.fierte.org</u> not Laura as previously requested.

Kind regards,

The Care Club Team



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Childs full name:				
Name to be used at Care C	lub:		Date of Birth:	
Gender:	Ethnicity:		Religion:	
First Language:	Other language	es spoken:		
Names of people with legal	responsibility:			
Names of people with legal	contact:			
P	ARENTS/CARE	RS INFORMAT	TION	
Name:		Name:		
Home Address:		Home Address:		
Postcode:		Postcode:		
Tel:		Tel:		
Mobile:		Mobile:		
Email:		Email:		
Work Address:		Work Address:		
Tel:		Tel:		
Email:		Email:		
Personal PASSWO	RD for the o	collection o	f my child:	
			cting my child will be:	
Name:	Relationship to	child:	Specimen Signature:	
Name:	Relationship to child:		Specimen Signature:	
Name:	Relationship to	child:	Specimen Signature:	
	Emergen	cy Contacts		
Name:	Relationship to		Tel:	
Name:	Relationship to child:		Tel:	
	G.P Info	ormation		
Name:	Practice:		Tel:	
Please provide details of	any significant	dietary require	ements or allergies	

Please provide details of any significant health issues including special educational				
needs and or physical difficulties.				
		_		
	hild to: [delete as appropriate			
Receive treatment at hospital. Yes NO	Have a plaster applied. Yes No	Wear face paints Yes No		
Be included on our website and		Share relevant information with your		
Facebook page.	photographs displayed on our board and in our evidence book	child's school.		
Yes No	Yes No	Yes No		
Watch DVDs rated U or PG.	Watch appropriate cartoons. Yes No	Watch/play games on a console Yes No		
Yes No		racing on chart sutings. For		
•	es may include visiting parks or hese activities we need your co			
appropriate]	,	Lieuw Lieuw Control Control		
I agree/disagree for my chil	d to take part in visiting parks o	r going on short outings.		
	tion about my child being share	d with other agencies where		
appropriate.				
Any other relevant informa				
terms and conditions set out in	Our Pride Our Joy Holiday Club for their policies and procedures. I use thing and the provision and I again.	inderstand the expectations and		
I understand that late fees will	result in my child losing their place	e for the holiday club applied for.		
I confirm that the information p any change of details.	rovided is correct and agree to ad	vise the Manager or Deputy of		
Signature of Parent/Carer: Date:				
<u> </u>				



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Photographs of people collecting

Photographs of people collecting from holiday club (these members will need to know your personal password too)

Add photo	Name of person: Relationship:
Add photo	Name of person: Relationship:
Add photo	Name of person: Relationship: