

JULES ET LIS – SUMMER HOLIDAY CLUB

Tel: 07808 869 182 www.julesetlis.co.uk Email: info@julesetlis.co.uk

Registration Form – Little Thurrock Primary School

PLEASE COMPLETE IN BLOCK CAPITALS.

PLEASE SEND COMPLETED FORMS VIA EMAIL OR HAND DELIVER DIRECT TO THE CLUB

<p>1. Child's first name (s)/ Preferred name <input style="width: 95%; height: 20px;" type="text"/></p> <p>2. Surname <input style="width: 95%; height: 20px;" type="text"/></p> <p>3. Address <input style="width: 95%; height: 40px;" type="text"/></p> <p>4. Date of Birth <input style="width: 25%; height: 20px;" type="text"/> <input style="width: 25%; height: 20px;" type="text"/> <input style="width: 25%; height: 20px;" type="text"/></p> <p>5. School Attended <input style="width: 95%; height: 20px;" type="text"/></p> <p>6. Please state names and contact details of who has legal contact and who has parental responsibility for your child (please specify):</p> <p>Name: Relationship to child: Address: Home telephone number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Work Contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Mobile contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Name: Relationship to child: Address: Home contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Work contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Mobile contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>7. Please state other persons whom are permitted to collect your child in an emergency:</p> <p>Name: Relationship to child: Address: Home Contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Mobile contact number: <input style="width: 95%; height: 20px;" type="text"/></p> <p>8. DOCTOR'S DETAILS</p> <p>Child's doctors Name: Address: Telephone number: <input style="width: 95%; height: 20px;" type="text"/></p>	<p>8. Does your child have any known medical problems or Additional needs? <input style="width: 95%; height: 20px;" type="text"/></p> <p>9. Does your child have any specific dietary, known allergies or major dislikes? <input style="width: 95%; height: 20px;" type="text"/></p> <p>10. In order to ensure your child's security we require a password – this password must be given to every person whom is permitted to collect your child. <input style="width: 95%; height: 20px;" type="text"/></p> <p>I give written permission to allow for my child to:</p> <ul style="list-style-type: none"> - Have Emergency medical advice or treatment if necessary. I have read the parents handbook and I am happy with the procedure that would be followed; - Have Photographs taken for promotional purposes Inc, social media sites, club displays and portfolios; - Have Sun cream applied by a member of staff (if required); - Go on walking excursions to the local parks; - Have Face paints applied; - Ride own bike with a protective helmet. (please delete as appropriate) <p>Prices: 7.30 a.m. – 3.30 p.m. - £24.00 7.30 a.m. – 6.00 p.m. - £26.00</p> <p>10% discount applies for children attending a full week!</p> <table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th style="padding: 2px;">WK COMM.</th> <th style="padding: 2px;">MON</th> <th style="padding: 2px;">TUE</th> <th style="padding: 2px;">WED</th> <th style="padding: 2px;">THU</th> <th style="padding: 2px;">FRI</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">27-07-20</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">03-08-20</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">10-08-20</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> <tr> <td style="padding: 2px;">17-08-20</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </tbody> </table> <p><u>PLACES WILL ONLY BE SECURED ONCE FULL PAYMENT HAS BEEN RECEIVED. Allocated on first come first server basis.</u></p> <p>Full fees are still payable for occasional sickness and absence. Refunds will only be given in exceptional circumstances.</p> <p>Payment Methods Bacs or Voucher: Sort Code: 60-09-11..... Account No: 72068132 Please use child's full name with HCLUB as a reference</p> <p><u>I CONFIRM THAT ALL OF THE INFORMATION ON THIS FORM IS CORRECT AND I AGREE TO ABIDE BY ALL OF THE POLICIES & PROCEDURES and TERMS & CONDITION S LAID OUT BY JULES ET LIS</u> Please see website for more information.</p> <p>Signed: <input style="width: 95%; height: 20px;" type="text"/></p> <p>Print: Date:</p>	WK COMM.	MON	TUE	WED	THU	FRI	27-07-20						03-08-20						10-08-20						17-08-20					
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