

Summer Activity Courses

2022

This form can be used from Friday 22 April for Summer bookings.

1. Child's details Please complete a separate form for each child

First Name: _____ Surname: _____ Date of birth: _____
Current school: _____ M: F: Age when course starts: _____

2. Parent's details Please give details of parent or guardian we should contact regarding these courses

Name: _____
Address: _____ Postcode: _____
Contact telephone numbers: Please tick which number we should call first during the course.
 Home: Mobile: Work: _____
Email address: _____
Name and contact details of an alternative Emergency Contact during the courses if parent is not contactable:
Name: _____ Relationship to child: _____
Contact telephone number(s): _____

3. Photography Consent

During every course we take photographs of the activities which we then use for publicity purposes including the next brochure, posters and on our website. Do you give consent for your child to be photographed? Yes: No:

Please note if you do not show a preference we will assume it to be yes.

4. General Data Protection Regulations (GDPR) Important

As part of the booking process you will be asked to provide personal data. For full information on data collected and its storage please read the notes on page 19 of the Holiday Activity Course Brochure. Details can also be requested by contacting the Holiday Activity Course office.

I confirm that I have read the information on GDPR contained within the brochure and agree to the collection and storage of information as set out and required for my child's attendance.

5. Course Choices

All course places are allocated on a first come first served basis. As courses fill up quickly, please select a first choice and reserve choice course for each session. Please write both the course name and code.

Week 1 Monday 25 July to Friday 29 July

AM 9.30 am - 12.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-AM		S-AM
PM 1.30 pm - 4.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-PM		S-PM

Week 2 Monday 01 August to Friday 05 August

AM 9.30 am - 12.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-AM		S-AM
PM 1.30 pm - 4.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-PM		S-PM

Week 3 Monday 08 August to Friday 12 August

AM 9.30 am - 12.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-AM		S-AM
PM 1.30 pm - 4.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-PM		S-PM

Week 4 Monday 15 August to Friday 19 August

AM 9.30 am - 12.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-AM		S-AM
PM 1.30 pm - 4.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-PM		S-PM

Week 5 Monday 22 August to Friday 26 August

AM 9.30 am - 12.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-AM		S-AM
PM 1.30 pm - 4.30pm	First choice Course Name	Course Code	Reserve choice Course Name	Course Code
		S-PM		S-PM

6. Early Birds and/or Late Flyers

If you would like your child to join the Early Birds and/or Late Flyers structured activity courses, please tick the sessions required. Each morning or afternoon session costs £2.50 or £5.00 per day for both the Early Birds and Late Flyers.

Week 1	Early AM	Late PM	Week 2	Early AM	Late PM	Week 3	Early AM	Late PM	Week 4	Early AM	Late PM	Week 5	Early AM	Late PM
Mon	<input type="checkbox"/>	<input type="checkbox"/>	Mon	<input type="checkbox"/>	<input type="checkbox"/>	Mon	<input type="checkbox"/>	<input type="checkbox"/>	Mon	<input type="checkbox"/>	<input type="checkbox"/>	Mon	<input type="checkbox"/>	<input type="checkbox"/>
Tues	<input type="checkbox"/>	<input type="checkbox"/>	Tues	<input type="checkbox"/>	<input type="checkbox"/>	Tues	<input type="checkbox"/>	<input type="checkbox"/>	Tues	<input type="checkbox"/>	<input type="checkbox"/>	Tues	<input type="checkbox"/>	<input type="checkbox"/>
Wed	<input type="checkbox"/>	<input type="checkbox"/>	Wed	<input type="checkbox"/>	<input type="checkbox"/>	Wed	<input type="checkbox"/>	<input type="checkbox"/>	Wed	<input type="checkbox"/>	<input type="checkbox"/>	Wed	<input type="checkbox"/>	<input type="checkbox"/>
Thurs	<input type="checkbox"/>	<input type="checkbox"/>	Thurs	<input type="checkbox"/>	<input type="checkbox"/>	Thurs	<input type="checkbox"/>	<input type="checkbox"/>	Thurs	<input type="checkbox"/>	<input type="checkbox"/>	Thurs	<input type="checkbox"/>	<input type="checkbox"/>
Fri	<input type="checkbox"/>	<input type="checkbox"/>	Fri	<input type="checkbox"/>	<input type="checkbox"/>	Fri	<input type="checkbox"/>	<input type="checkbox"/>	Fri	<input type="checkbox"/>	<input type="checkbox"/>	Fri	<input type="checkbox"/>	<input type="checkbox"/>

7. Medical details Please ensure ALL questions are answered in full

a. Does your child currently have any of the following conditions?
 Asthma **Yes/No** Hayfever **Yes/No** Eczema **Yes/No** Migraine **Yes/No** Diabetes **Yes/No** Epilepsy/Convulsions **Yes/No**
 If yes, please give details:

b. Does your child have any allergies? **Yes/No** If yes, please give details including any medication required:

c. Are there any recent illnesses/conditions of which we should be aware? **Yes/No** If yes, please give details:

d. Do you give consent for the School Nurse to administer or offer the following to your child, if considered necessary?
 Paracetamol (Calpol) **Yes/No** Anti-histamine **Yes/No** Sun cream **Yes/No**

Medical Declaration: In the unlikely event of an emergency arising in which it is impossible to contact you, will you sign below to give the School permission to act on your behalf?

Signature: _____ Print name: _____ Date: _____

8. Miscellaneous information

Please provide any additional information you feel may be important for your child’s booking, either medical or general:

9. Checklist and payment I enclose the following

The course fee of £ _____ including payment for the Early Birds and/or Late Flyers if applicable (Cheque made payable to Bedford Modern School).

Payment due by Childcare Vouchers/ Tax Free Childcare Scheme £ _____ **I understand that if payment confirmation is not received by BMS within 7 days of receipt of the booking form courses will be cancelled.**

Signature: _____ Date: _____