

Windlesham Active Camps and Academy: Long Weekend 19th November Booking Form

Child's Full Name: _____

Year Group _____

Medical: Please specify any medical conditions, allergies or specific needs, please provide full details:

Contact Details:

Please complete this section in the event we need to contact you for any reason.

Parent/Guardian Name: _____

Tel No. _____

Email Address: _____

If someone else is collecting your child, other than yourself, please contact Emma Harris on 01903 874705 who will provide you with a password for collection.

Please circle **every** section of the following indicating **yes** or **no**:

Swimming:	
Beginner (requires swimming aids: please provide daily)	Yes/No
Can swim 15m+ (without swimming aids)	Yes/No

Booking Consents:	
Any medical treatment administered to a child will be recorded in our accident report book.	Yes/No
I consent to any emergency medical treatment necessary.	Yes/No
I consent to sun cream I have supplied being applied to my child by Windlesham Activity Camp Staff as deemed necessary.	Yes/No
I consent to bite/sting relief to be administered as deemed necessary.	Yes/No
I am legally responsible for the child(ren) booking and agree to the booking conditions.	Yes/No
I understand I shall be charged £20 for the Windlesham Activity Camp in my next school invoice.	Yes/No

Please Note: Lunch will be provided as usual at the school.

Parent/Guardian signature: _____

Print name: _____

Date: _____

Please return your completed form to holidays@windlesham.com by Wednesday 17th November 2021