** April Holiday 2025 Activity Booking Form**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Please tick****required sessions** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| Week Beginning | **Sporting Stars** 9am-4pm**£30** | **Esports Stars**  9-11am**£15** | **Esports + Sporting Stars** **(Full day)** 9am-4pm**£35** | **Sporting Stars**9am-4pm**£30** | **Esports Stars**9-11am**£15** | **Esports + Sporting Stars** **(Full day)** 9am-4pm**£35** | **Sporting Stars**9am-4pm**£30** | **Esports Stars**9-11am**£15** | **Esports + Sporting Stars** **(Full day)**9am-4pm**£35** | **Sporting Stars**9am-4pm**£30** | **Esports****Stars** 9-11am**£15** | **Esports + Sporting Stars** **(Full day)** 9am-4pm**£35** | **Sporting Stars** 9am-4pm**£30** | **Esports Stars** 9-11am**£15** | **Esports + Sporting Stars** **(Full day)**9am-4pm**£35** |
| **7th April** | 7th | 7th | 7th | FULL | FULL | FULL | 9th | FULL | FULL | 10th | FULL | FULL  | 11th | 11th | 11th |
| **14th Apr** | 14th | 14th | 14th | 15th | 15th | 15th | 16th | FULL | FULL | 17th | 17th | 17th | CLOSED |

Please complete your personal details on the next page:

|  |  |  |  |
| --- | --- | --- | --- |
| **Office Use:** | Date booking made:  | Payment Method: | Amount Paid:  |
| Booked By: |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Child’s Name:** |  | **D o B:** |  | **Age:** |  | **Password:** |  |
| **Child’s Name:** |  | **D o B:** |  | **Age:** |  | **Password:** |  |
| **Child’s Name:** |  | **D o B:** |  | **Age:** |  | **Password:** |  |
| **Parent/Guardian Name (1st Emergency contact):** |  | **Home Number:** | **Mobile Number:** | **Work Number:** |
|  |  |  |
| **Email Address:** |  |
| **Address:** |  | **Postcode:** |  |
| **2nd Emergency Contact Details:** | **Name:** | **Home Number:** | **Mobile Number:** | **Work Number:** |
|  |  |  |  |
| **Medical or Behavioural Conditions:** | Yes\* (please detail below) | No | **Swimming Capability:****(Please circle)** | Weak | Capable | Strong |
| **Notes:** |
| **I give permission for photographs of my child to be taken and used for online advertising material :** | Yes | No |
| **Where did you hear about us?** (Please circle) | Kim Chapman | Instagram | Club based at QMC | Website | Email | School Leaflet |
| Internet Search | Facebook | Family/Friend | Families Magazine | Other: (please specify) |
| **Parent/Guardian Signature:** |  | **Print name:** |  | **Date:** |  |

**Personal Details:**