

Holiday Club Registration Form WGC United Reformed Church

Tues 30th May & Thurs 1st Jun 2017, 10am to 12.00

Ages 5 to 11, Reception to Year 6

Donation suggested £4 per morning



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************** **WGCURC Holiday Club Registration Form**

Please use one form per child

| Please book a place for my child at the Half-term Holiday Club . |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Child's nameAge: |
| Parent's/Carer's name Telephone/Mobile Email School |
| Year Rec, 1, 2, 3, 4, 5, 6 (Please circle) |
| I understand that while involved in the Club, my child will be under the control and care of adults approved by WGCURC and that, while they will take all reasonable care of the children, they cannot necessarily be held responsible for any loss, damage or injury suffered by my child as a result of the activity. |
| Photographs may be taken as future promotion or as a record of the event. I agree for my child's photograph to be included YES / NO My address/email may be used to contact me about other family-oriented events organised by WGC URC in the future YES / NO (delete as appropriate) |
| Please be aware of the following allergies, medical, dietary or special needs of my child: |
| Emergency Contact Name: Emergency Contact Number: |
| Signed(Parent/Carer) |
| Please return this completed form to: Half-term Holiday Club WGC URC, Church Road. Welwyn Garden City AL8 6PS |

Email: Wendy.Lidgate@outlook.com

Ring Wendy on 07904 517384 if you have any queries. There is a black letter box at the Parkway end of the church site.

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| $\frac{1}{2}$ | Please book a place for my child at the Half-term Holiday Club. |
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