



Church Hill Nursery School Christmas Holiday 2022 Playscheme



please fill in both sections of the form

Please fill out every part of the booking form and **return to the nursery. Your place is only booked once we have received full payment.** The last booking date is **Monday 12th December 2022**, however **this does not guarantee that places are still available.** Please check availability with the office when making your booking.

Child's Name: Age and D.O.B:

Parent/Guardian Name & Telephone number:

E-mail Address:

December:	Week 1: £30 a day 8am-4pm
Mon 19 th December	Fully booked
Tues 20 th December	Fully booked
Weds 21 st December	Fully booked
Thurs 22 nd December	
Fri 23 rd December	

PLEASE REMEMBER TO SEND YOUR CHILD WITH A PACKED LUNCH AS THE NURSERY DOES NOT PROVIDE THIS

Terms and Conditions:

- I understand that once the contract is signed, if I wish to make any changes to my provision **a minimum of 2 weeks' notice** is required in writing to the school office email address a 10% cancellation will be charged, **and the full agreed fees will be charged if notice is less than two weeks**
- I understand that if my child is sick, or absent for any reason, the fees are still payable.
- I understand that an unwell child should be kept at home (if they have been vomiting or had a temperature within 48 hours).
- I understand that failure to keep this agreement may result in the loss of my extended day place.
- Once booking has been made, we are unable to swap days
- If you are late collecting your child, there is a charge of **£10 for every 15 minute interval after 4:00pm**

Extended Day Care payments

You have agreed to take extended day provision.

You can choose to pay for these with child care vouchers, if you receive them through your place of work, or you can pay for fees directly to the school. **Please tick one payment option:**

School money Childcare Vouchers ref no..... TAX FREE CHILDCARE (NON-REFUNDABLE)

Proof of payment to be emailed to:

- admin@fans.waltham.sch.uk * Church Hill Bank account: 30-99-08 01778227

Signed: (Parent/Carer)

Print Name Date

OFFICE USE ONLY:

Date of Booking:

Ticked off chart Added to Register Added to SM PAID

Home Address:
Post Code:

(1)Parent/Carer Name:	
Home Address <i>(if different from above)</i> :	
Mobile ☎:	Home ☎:
Work ☎ :	Email:

(2)Parent/Carer Name:	
Home Address:	
Mobile ☎:	Home ☎:
Work ☎ :	Email:

Please give details of any other person authorised to collect the child, or emergency contact::

(3)Parent/Carer Name:	
Home Address:	
Mobile ☎:	Alternative ☎:

(3)Parent/Carer Name:	
Home Address:	
Mobile ☎:	Alternative ☎:

IMPORTANT Please give details of any current Medical Information or Special/additional needs that your child has e.g.: medical conditions/ allergies/ dietary needs: Nappies- our expectation is for children to be toilet trained to be able to attend playscheme

Any other useful information we should know:

Doctor's Name:

Doctor's Address:

Post Code:

☎:

Language spoken at home: