



T H E
GLASGOW ACADEMY

Name Contact Telephone Number
 Address
 e-mail Address

Name of Child/Children..... Class
 Class

Summer Holiday Club 2009

Full Day Bookings at £27.50 per day Half Day bookings at £14.00 per day
 Please state am or pm

| | | | | |
|--------------------------------|---------------------------------|---------------------------|-----------------------------|---------------------------|
| | | Wed 24 th June | Thurs 25 th June | Fri 26 th June |
| Mon 29 th June | Tues 30 th June | Wed 1 st July | Thurs 2 nd July | Fri 3 rd July |
| Mon 6 th July | Tues 7 th July | Wed 8 th July | Thurs 9 th July | Fri 10 th July |
| Mon 13 th July | Tues 14 th July | Wed 15 th July | Thurs 16 th July | Fri 17 th July |
| Mon 20 th July | Tues 21 st July | Wed 22 nd July | Thurs 23 rd July | Fri 24 th July |
| Mon 27 th July | Tues 28 th July | Wed 29 th July | Thurs 30 th July | Fri 31 st July |
| Mon 3 rd Aug | Tues 4 th Aug | Wed 5 th Aug | Thurs 6 th Aug | Fri 7 th Aug |
| Mon 10 th Aug | Tues 11 th Aug | Wed 12 th Aug | Thurs 13 th Aug | Fri 14 th Aug |
| Mon 17 th Aug | Tues 18 th Aug | Wed 19 th Aug | Thurs 20 th Aug | Fri 21 st Aug |
| Mon 24th Aug | Tues 25th Aug | | | |
| No Service | No Service | | | |

All full day trips will be clearly marked on the programme: there will be no half day bookings available on these dates

Trip days will be limited numbers due to transport restrictions



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Cool Kids' Club Permission Form

Name of Child/Children Class
.....Class

Can I ask parents to complete this form and return it to the school with all booking forms?

I hereby give permission for my child/children to go on local walks and/or use local public and school transport. YES/NO

I hereby give permission for my child/children to have a high quality, high factor sun cream applied if necessary. YES/NO

If your child has sensitive skin or allergies please supply your own sun cream.

I hereby give permission for my child/children to have photographs taken while attending the Cool Kids' Club. YES/NO

I hereby give permission for a medical plaster to be administered if my child/children's skin is broken in an accident. YES/NO

I hereby give permission for my child/children to have a snack and lunch during their stay at Cool Kids' Club . YES/NO

I hereby give permission for my child to have their face painted. YES/NO

I hereby give permission for my child to use eggs when baking as it is my belief they do not have an allergy to egg or egg products YES/NO

If your child/children have any other requirements and/or any allergies please complete the box below.

Signature of Parent.....Date