



*in association with*



**CLIFTON HALL**  
SCHOOL · EDINBURGH

### HOLIDAY CLUB BOOKING FORM

Child's name.....

Home Telephone number.....

Mobile telephone number.....

Email address.....

Child's age .....

My child can/ cannot swim 25 metres or over.  
My child is/is not water confident. *(please delete)*

Please list any known medical conditions for your child which you think our instructors should know about (eg asthma, diabetes, epilepsy, heart trouble, allergies).

.....  
.....

Dietary requirements (eg allergies, vegetarian diet)

.....  
.....

**Please tick**

- Course A      Ages 5 – 9      £185
- Course B      Ages 10 – 13      £195
- Course B      Ages 14 – 18      £205

Courses will be run on the following weeks (please tick)

- |  |                          |   |                          |
|--|--------------------------|---|--------------------------|
| Mon 12 <sup>th</sup> – Fri 16 <sup>th</sup> July | <input type="checkbox"/> | Mon 2 <sup>nd</sup> Aug – Fri 6 <sup>th</sup> Aug   | <input type="checkbox"/> |
| Mon 19 <sup>th</sup> – Fri 23 <sup>rd</sup> July | <input type="checkbox"/> | Mon 9 <sup>th</sup> Aug – Fri 13 <sup>th</sup> Aug  | <input type="checkbox"/> |
| Mon 26 <sup>th</sup> – Fri 30 <sup>th</sup> July | <input type="checkbox"/> | Mon 16 <sup>th</sup> Aug – Fri 20 <sup>th</sup> Aug | <input type="checkbox"/> |

I enclose a full payment of £..... (cheques made payable to Clifton Hall School).  
We can also accept payment by debit/credit card (in person or over the phone)

I hereby confirm that the foregoing details are correct. I confirm that I have read, understood and accepted the terms and conditions. I understand that in signing this booking form I am entering a legally binding agreement with Raasay House and Clifton Hall School.

Signed.....Parent/guardian

Date.....