

Strathmore Easter / Summer Holiday Club 2025



Child's details

Name:	DOB:
Allergies (please provide details)	Medication (please provide details)
Favourite toys / activity / interests:	
Please provide below anything you wish us to know about your child that will help us care for them during	

Emergency Contact 1

Parents/carers name: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Email: _____

Emergency Contact 2

Parents/carers name: _____

Address: _____

Postcode: _____

Telephone: _____

Mobile: _____

Email: _____



Cost of sessions

AM Half Day	9.00 – 12.00	£25
PM Half Day	12.00 – 3.00	£25
or Full Day	9.00 – 3.00	£45

Please indicate tick which sessions you would like:

Easter: April

Day	Monday 8 th	Tuesday 9 th	Wednesday 10 th	Thursday 11 th	Friday 12 th
Session	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY

Summer Week 1: July/August

Day	Monday 29 th	Tuesday 30 th	Wednesday 31 st	Thursday 1 st	Friday 2 nd
Session	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY

Week 2: August

Day	Monday 5 th	Tuesday 6 th	Wednesday 7 th	Thursday 8 th	Friday 9 th
Session	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY	AM/PM/DAY

Please return this form with a £25 deposit per child per holiday club (please indicate).

Easter - £25 Summer - £25 Both - £50

Bank details: HSBC, The Early Bird Pre-School CIC sort code: 40-28-14 account number: 11782665

This will be deducted from your invoice. Please note we require 14 days' notice to cancel your place or the deposit will be not be refundable.

Parent signature _____

Office use:

Date Form received: _____

Deposit received: _____

Invoice sent: Easter _____

Summer _____