Details of children enrolling

For office use only

Ref:

	Child 1	Child 2	Child 3	Child 4
Name				
Boy/Girl				
Address				
Postcode				
Age @ 31st Aug '19				
Bus Stop e.g. A1, B2, C3 etc.	*Pickup* / *Drop Off*	*Pickup* / *Drop Off*	*Pickup* / *Drop Off*	*Pickup* / *Drop Off*
Car – Non BAe	Children should arrive between 9.00am and 9.30am and be collected at 4.00pm			
Car – BAe & Contractors Please tick the relevant section	Children may arrive between 8.00am and 9.30am. Please indicate your collection time below			
	1600-1625 / 1625-1640 / 1640-1700	1600-1625 / 1625-1640 / 1640-1700	1600-1625 / 1625-1640 / 1640-1700	1600-1625 / 1625-1640 / 1640-1700
Teenz Only Activity Group e.g. A, B, C, D	1st Choice / 2nd Choice	1st Choice / 2nd Choice	1st Choice / 2nd Choice	1st Choice / 2nd Choice
Additional Needs/Allergies etc.	Please tick if you need to tell us more information	Please tick if you need to tell us more information	Please tick if you need to tell us more information	Please tick if you need to tell us more information
Emergency Contact Nos	***In case of emergency please give relevant contact numbers for each child (you may give more than one number if you feel it appropriate)***			

PLEASE DO NOT WRITE BELOW THIS LINE

ENROLMENT FORM 2019

For Office Use Only

Ref

PLEASE SEE ENCLOSED LEAFLET FOR FURTHER DETAILS AND INFORMATION ON HOW TO COMPLETE THIS FORM

Payment Summary

Registration Fees @ £74 per child

No of Children _____ x £74 = £_____

Service bus contribution _____ x £1 = £_____
(Please complete if children are travelling to/from the scheme by bus)
£1 per child for the week or part week *(sorry, no daily rate)*

Member's Discount £5 (total) £_____
(one off deduction if applicable)

Prize Draw Entry Fee (Draw Date 29th July 2019) £ 1.00 *
*(*Free places up for grabs!! - £74 refund for winners!)*
*(*Delete if entry not required)*

Total Payable £_____

Please note:-

Once registration documents have been issued any group or transport changes will incur an additional charge of £5 per child

Please return completed form to:-

SS&SA (S11), Playscheme Registrar, Samlesbury Aerodrome, Balderstone, Blackburn, BB2 7LF

Payment Details

Payment Method (please tick)

Cheques should be made payable to SS&SA

CASH ☐ ***CHEQUE*** ☐ ***Credit/Debit Card*** ☐

Card Signatory _____

Card Number

☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐

Expiry Date ☐☐/☐☐

Security Code (CVV) ☐☐☐

Issue No *(if applicable)* ☐☐

Please note—card details will be destroyed once processed

Enrolment Contact Details

Parents Name ..... Signature .....

Address .....

.....

Postcode .....

Home Telephone .....

Mobile Telephone .....

Email address .....

Samlesbury Sports & Social Assoc. Membership Details
(Please complete one of the details below to claim the membership discount)

Employee Member Dept & Clock No .....

Associate or Fitness Centre Mem No .....

IMPORTANT

Please advise any Health or Behavioural Issues which we need to know about. i.e. Medication, Allergies, Medical conditions etc. by ticking the relevant box overleaf and we will send you an 'Information Passport' by return.
This will give you the opportunity to tell us all the information we need to know

Credit/Debit Card payments

Cardholders FULL name and address (including postcode) **if different to that above**

PLEASE PRINT .....

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