



Half-Term Sport and Activity Camp

Tuesday 28th – Friday 31st May 2019

I would like my son / daughter to attend the Half-Term Sport and Activity Camp at Wellesley House on the following day(s):

Tuesday 28th May Wednesday 29th May Thursday 30th May Friday 31st May

Tuesday 28th – Friday 31st Inclusive

I enclose a cheque for £ payable to Wellesley House School.

Child's name:

Home address:

..... Postcode:

Age: School:

My son / daughter is able to swim 25m unaided. **Yes / No**

Does your son / daughter have any medical conditions / allergies? **Yes / No**

If yes, please give further details:

.....

Parent Name:

Home address:

..... Postcode:

Email:

Emergency contact 1:

Emergency contact 2:

If you are unable to contact me and my child requires urgent medical attention while at the Wellesley House Half-Term Sports and Activity Camp, I authorise you to make the decision on my behalf should consent be required for urgent treatment (including general anaesthetic, blood transfusion or operation) recommended by a doctor, or to receive first aid.

Signed: (Parent / Guardian)

Print name:

Relationship: Date:

**Once completed, please return the form, plus payment, to: Mrs Baird, Headmaster's PA,
Wellesley House, Broadstairs, Kent, CT10 2DG. Thank you.**