



SUMMER HOLIDAY **ACTIVITY CAMP**

Mon 24th July-Mon 4th Sept

For ages 5-12





BUUKING FUKN	
Child's Name:	D.o.B
Emergency Contact #1 Name	
Tel.	
Emergency Contact #2 Name	
Tel.	
Email:	

Select	Dates:	
	_	

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Μ	lon	Tue	Wed	Thu	Fri	Staying	
_	4th '/N	25th Y/N	26th Y/N	27th Y/N	28th Y/N✓	until 5pm? Delete as appropriate	
	1st '/N	1st Y/N	2nd Y/N	3rd Y/N	4th Y/N		
	th //N	8th Y/N	9th Y/N	10th Y/N	11th Y/N		
	4th '/N	15th Y/N	16th Y/N	17th Y/N	18th Y/N		
	1st '/N	22nd Y/N	23rd Y/N	24th Y/N	25th Y/N	Continue Overle	
		29th Y/N	30th Y/N	31st Y/N	1st Y/N	ue Ove	
4	1th					ē	

Continue Overlea

SUMMER HOLIDAY ACTIVITIES



9.00am-8.30am 10.30am

10.30am-12.00noon 12.00noonma00.1

1.00pm-2.00pm

2.00pm-3.30pm

Drop Off & Register Activity Session

Activity Session

Lunch (Bring your own) Activity Session

3.30pm Pick-up Activity Session

5.00pm ONLY F21 Extra 90mins Film Screening

3.30pm-

5pm Pick-Up

FULL 5-DAY WEEK PRICE: £80

4-DAY WEEK PRICE: £64

Only available w/c Tues 29th Aug

SAVE UP TO £15 and stay until 5pm for FREE!

Venue: King's Park Sports, Kings Park Road Northampton, NN3 GLL

includes



LIMITED PLACES AVAILABLE!

To reserve your child a place call King's Park Sports today

Email: sue@benhamarena.org.uk

Web: www.acuk.net

Medical Matters

Please list any medical conditions your child may have:

Please give details of any medicines being taken, allergies, ongoing treatments (and any carried out in last 12 months): Please read statement to the below. Sign and date if you agree:

Parent's Sig.

Date:







I am aware that climbing, hill walking and mountaineering activities are with a danger of personal injury or death. I have understood the nature of the activity and accept the risk involved. I confirm that I am the parent/guardian of the aforementioned named child and that I consent for him/her to take part in climbing at Benham Sports Centre. I consent to any emergency medical treatments necessary during the course of events including the administration of anaesthetics. Participants in these activities should be aware of and accept these risks and be responsible for their own actions and involvement.

Office use only:

Payment Taken (amount) Taken By

Date