



# Frays Academy Trust Booking Form



Please complete in BLOCK CAPITALS

Contact Information

Child's Name \_\_\_\_\_

School attended \_\_\_\_\_ Year \_\_\_\_\_ Class \_\_\_\_\_

Age \_\_\_\_\_ Male  Female  (please tick) Date of Birth (dd mm yyyy) \_\_\_\_\_

Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Post Code \_\_\_\_\_

Tel. No. 1 \_\_\_\_\_ Tel. No. 2 \_\_\_\_\_

Email \_\_\_\_\_

Person collecting your child\* \_\_\_\_\_  
\*You must inform **AKTIVA CAMPS** of any change to this named person

Who has legal contact with the above named child(ren)? \_\_\_\_\_

Who has parental responsibility for the above named child(ren)? \_\_\_\_\_

Name of G.P. \_\_\_\_\_ G.P.'s Tel. No. \_\_\_\_\_

G.P.'s Address \_\_\_\_\_  
 \_\_\_\_\_

Medical Emergency

In the event of \_\_\_\_\_ (full name of child) requiring medical or surgical treatment, including the administration of local or general anaesthetics in any emergency during his / her stay at **AKTIVA CAMPS**, I hereby give my consent to such treatment as may be considered necessary by a registered medical practitioner.

During their stay at the camp, will your child have any: If **YES** to any of the questions to the left, please attach additional information.

Medical requirements? (e.g. asthma) **YES**  **NO**

Dietary requirements? **YES**  **NO**

Special educational needs or disability? **YES**  **NO**

**X** Signed \_\_\_\_\_ (Parent/Guardian)

Payment

**Debit or credit card payments** can be processed through our accounts department, by calling **020 3551 8909**. (Please note for credit card payments there is an additional 2% charge). **No cheques or cash please**

**I will pay via childcare vouchers.** Amount £ \_\_\_\_\_  
 Provider \_\_\_\_\_

**I will pay the full amount via bank transfer. Account:** Aktiva Camps Ltd Amount £ \_\_\_\_\_  
**Bank:** HSBC Plc **Account No:** 11402250 **Sort Code:** 40-05-09

Consent & Signature

Please give your consent for us to use plasters in the event that your child has a minor injury.

Please give your consent for us to use cleansing wipes were deemed necessary.

Please give your consent for us to supply your child with sun cream that they will apply to themselves in hot weather.

Please give your consent for us to support your child in changing their clothes in the event of them becoming wet or soiled due to an accident or during water or messy play.

Please tick if your child qualifies for FSM

**X** Signed \_\_\_\_\_ (Parent/Guardian)

Date \_\_\_\_\_

**By signing this booking form, you agree to the terms and conditions on the Aktiva Camps Ltd website [www.aktivacamps.com](http://www.aktivacamps.com)**

Please return completed booking form to:  
**Aktiva Camps Ltd, 1 Lyric Square, London, W6 0NB**



# Frays Academy Trust Booking Form

Venue

Please select an After School Club venue:



Laurel Lane Primary School



St Matthews Primary School



St Martin's Primary School

Daily Bookings

Please tick the days you would like to book:

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Full week (Monday–Friday)  
**10% discount for full week bookings only**

Requested start date (dd/mm/yyyy):

### Monthly fees

No. of days	After School Club
1	£38.50
2	£77.00
3	£115.00
4	£154.00
5	£173.00

Last Minute Child Care

Please provide the dates you would like to book:

£15.00 per session

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Our After School Club offers a wide range of activities for children from Nursery to Year 6. We offer yearly, termly and LAST MINUTE bookings. Cancellations and amendments require 6 weeks written notice which can be emailed to [bookings@aktivacamps.com](mailto:bookings@aktivacamps.com). Aktiva Camps offers a multi-choice, multi-activity programme and there will be a daily choice of activities including sports, arts, crafts, dance, drama and games. We understand that children enjoy choosing the activities and pride ourselves on adapting to the needs of the groups. We also understand that they will have had a whole day at school so strive to create a relaxed and enjoyable atmosphere. Children will be given a healthy snack and refreshments throughout the afternoon.

To reserve your place, please complete the form and return to us at your earliest convenience; our team will then contact you via email to confirm your booking.

- Are you interested in our holiday camps?
- Are you interested in our weekend activities?
- Are you interested in our birthday parties?

**AKTIVA CAMPS LIMITED**

**Aktiva Camps at Frays Academy Trust**

Ofsted registered

1 Lyric Square, London, W6 0NB  
Tel: +44 (0)20 3551 8909  
Email: [bookings@aktivacamps.com](mailto:bookings@aktivacamps.com)

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[www.aktivacamps.com](http://www.aktivacamps.com)