

Important things to remember when using the Playscheme

1. Please make sure your child comes to Playscheme with a healthy packed lunch and plenty to drink. We provide a variety of items for breakfast (from honey on toast to scrambled eggs - yum!) and snacks throughout the day.
2. Please ensure your child comes with sun-cream applied, and has sun-cream and a hat in their bag during the warmer weather, and a coat, hat, gloves etc and wellies in the colder months. Extra clothing is also useful! Comfy practical shoes are a must.
3. Once submitted, dates and sessions that you have booked cannot be changed.
4. Please ensure you have a booking form and **a contract form** completed before your child attends for the holidays.
5. The Playscheme will only be able to run on days that we have enough children to ensure it is feasible. Parents will be contacted if the day you have booked is not able to run.
6. **Please make a note of our contact details:**
Telephone: 01303 267802 (Option 2)
Email: LSharp@hythebay.kent.sch.uk
Or nursery@hythebay.kent.sch.uk
Address: Hythe Bay Children's Centre
Cinque Ports Avenue,
Hythe, Kent,



HYTHE BAY CHILDREN'S CENTRE
OUT OF SCHOOL CLUB

April 2024

Playscheme

BOOKING FORM

Please complete the booking form using BLOCK CAPITALS.

Child's name	
Child's school	
Parent/carer(s)	
Contact number(s)	
Contact email	

Our Holiday Playscheme offers
 a short day session open 8am-3pm
 or a long day session open 7.30am-5pm.

Please tick which days and sessions you require childcare:

Date	Short Day Playscheme 8am-3pm £28 per day	Long Day Playscheme 7.30am-5pm £38 per day
Tuesday 2nd April		
Wednesday 3rd April		
Thursday 4th April		
Friday 5th April		
Monday 8th April		
Tuesday 9th April		
Wednesday 10th April		
Thursday 11th April		
Friday 12th April		

I give permission for (name of child):

.....
 to attend the Hythe Bay Out of School Club Playscheme.

I give permission for my child to attend any outings that are planned for the Playscheme.

I understand that this may include trips on public transport.

In the event of an emergency where I cannot be contacted I give permission for treatment to be given, including an anaesthetic if necessary.

Signed:..... Date:.....

Print:.....

