



# The Jabberwocky Club

## *Holiday Care*

**23rd Dec 24 – 2nd Jan 25**

For all 4 to 11 year olds  
(Reception Class and above)

***Open Monday to Friday – From 7:30am to 6:30pm***

**Tax Free Childcare Scheme Payments Accepted**

Top Floor, 2 Bolton Road, Addingham, Ilkley, West Yorkshire, LS29 0NR

Telephone: 01943 839000

Email: [nurseryrhymes999@yahoo.com](mailto:nurseryrhymes999@yahoo.com)

Website: [nurseryrhymesdaynursery.co.uk](http://nurseryrhymesdaynursery.co.uk)

# Application Form - Christmas Holiday Club 2024

Please return this form to:  
**The Jabberwocky Club, Top Floor, 2 Bolton Road, Addingham, Ilkley, LS29 0NR**  
 (Ofsted registration N° 957307)

**Parent/Guardian Information**

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Mobile Telephone \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

**Child Information**

First Names \_\_\_\_\_ Surname \_\_\_\_\_

Date of Birth \_\_\_\_\_ Religion \_\_\_\_\_

First Language \_\_\_\_\_ Ethnic Origin \_\_\_\_\_

Doctors Name \_\_\_\_\_ Telephone \_\_\_\_\_

Dentist \_\_\_\_\_ Telephone \_\_\_\_\_

Allergies \_\_\_\_\_

Regular Creams or Medication \_\_\_\_\_

Special Dietary Requirements \_\_\_\_\_

Additional Requirements/Information \_\_\_\_\_

Please circle required sessions						
Week 1	23 <sup>rd</sup> to 27 <sup>th</sup> Dec	Mon	Tue	N/A	N/A	N/A
Week 2	30 <sup>th</sup> to 3 <sup>rd</sup> Jan	N/A	N/A	N/A	Thu	Fri
Total N° of days				x £37 =		

Please phone or email to check availability for required dates before returning this form. Please send payment along with this form within 7 days of booking. We can only guarantee your booking on receipt of your payment.

**Declaration by Parent/Guardian (Please delete where permission is not given)**

I/we as parent(s)/Guardian(s) apply for our child to enroll at the Jabberwocky Club for the above dates. I/we give permission for our child to be treated for illness or injury and give permission for my/our child to be taken to hospital should an emergency arise. I/we give permission for staff to administer plasters if the need arises. I/we give permission for my/our child to be taken on outings in accordance with the setting's outings policy, which may also include the use of public transport. I/we also give permission for the setting to take and use photographs of my/our child for internal/external promotional purposes, including our website and social media.

(Please delete where permission is not given).

Signed (Parent/Guardian) \_\_\_\_\_ Date \_\_\_\_\_ Payment Sent on \_\_\_\_\_

Bank Details: Santander Account Name: Nursery Rhymes LLP Sort Code: 09-07-20 Account No:03217043  
 (Please use child's full name as a reference)

Please note you can download these holiday forms from [www.nurseryrhymesdaynursery.co.uk](http://www.nurseryrhymesdaynursery.co.uk) under "Jabberwocky Club upcoming holidays"



