

Oak-Tree Schools

October Half Term Activities Programme 2019



Child's Name:

Date:

School:

Class:

Multi-Sports Sessions

Please mark the boxes to indicate your preferred amount of days, the specific days being attended and complete the 'Total due' box below.

Multi-Sports held at Coopersale Hall					
Course A - Monday 21 to Friday 25 October at Coopersale Hall 5 days at £100 <input type="checkbox"/> 4 days at £80 <input type="checkbox"/> 3 days at £60 <input type="checkbox"/>	Monday	Tuesday	Wednesday	Thursday	Friday
Course B - Monday 28 October to Friday 1 November at Coopersale Hall 5 days at £100 <input type="checkbox"/> 4 days at £80 <input type="checkbox"/> 3 days at £60 <input type="checkbox"/>	Monday	Tuesday	Wednesday	Thursday	Friday
Multi-Sports held at Oaklands					
Course C - Monday 21 to Friday 25 October at Oaklands 5 days at £100 <input type="checkbox"/> 4 days at £80 <input type="checkbox"/> 3 days at £60 <input type="checkbox"/>	Monday	Tuesday	Wednesday	Thursday	Friday
Course D - Monday 28 October to Friday 1 November at Oaklands 5 days at £100 <input type="checkbox"/> 4 days at £80 <input type="checkbox"/> 3 days at £60 <input type="checkbox"/>	Monday	Tuesday	Wednesday	Thursday	Friday
Total due for Multi-Sports:					

Payment may be made by (please tick):

- cheque - made payable to Oak-Tree Schools Ltd
- cash - please secure in a clearly marked envelope and leave with the School Office
- bank transfer - Sort Code: 20-52-82 Account Number: 50139017 Account Name: Oak-Tree Schools Ltd
- online - www.oaktreeschools.co.uk/payments
- credit/debit card - contact our Head Office Accounts Dept: 020 8508 3109 / bookings@oaktreeschools.co.uk

We will aim to accommodate as many choices as possible, and will email you to confirm your booking. If numbers are insufficient for any of the courses we will refund your payment. All children are expected to behave in a disciplined and responsible manner during the courses. We reserve the right to cancel bookings if behaviour consistently falls below the expected level.

Name of Parent/Guardian		Email address	
Emergency contact numbers			
Home Address			
Relevant medical information			
Signature of Parent/Guardian			