

HOLIDAY ACTIVITY FUND (HAF) BOOKING FORM EASTER HOLIDAY CLUB: 7th – 17th April 2025

Full Name of Student:

Age & DOB (date of birth): Gender (male or female):

Address:

Postcode:

SEND: Y N If Y, pls. specify:

Requested Booking Date(s) – all dates to be listed:

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.....
.....

Unique HAF Code:

Name of School:

Does this child receive benefit related free school meals: Y N

Parent/Guardian Full Name:

Parent/Guardian DOB (date of birth):

Telephone:

Email:

I have read and understood all associated HAF and Holiday Club rules, regulations and terms & conditions.

Signature of parent/guardian:
.....

Date:

