**OPTIMUM COACHING**

**OCTOBER HALF TERM**

**BOOKING FORM**

**Booking Price - £20.00 Single Day Rate 9:00am – 4:00pm**

|  |  |
| --- | --- |
| Monday 24th |  |
| Tuesday 25th |  |
| Wednesday 26th |  |
| Thursday 27th |  |

 **Week 1 Booked**

I give permission for my child ……………………………… from the school of ………………………………………………. to be under the care of Mr Louis Munnery (Optimum Coaching) and Charlotte Munnery (Optimum Coaching) between the hours of 9:00am – 4:00pm on the dates selected above. Any queries or for contact, please call 07528178969 (Charlotte Munnery)

Signature…………………………………………………………. Password……………………………………………………………

Please list here emergency contact details (Address and telephone number)

1……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

2……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Please list here any medical conditions your child has:

Please list here any allergies your child has: