STREET SUMMER SCHOOL

Summer School Application (cash/chq application)
Name
D.O.B
Address
Telephone Number
Contact Name
2nd number for use
in emergency
Contact Name
Medical Information: Please give any information which will be used in strictest confidence re allergies, medications, old or recurring injuries
I
give consent for him/her to
participate in the summer school programme Monday 16th to
Thursday 10th Tuly in Cirls Madel Calcal Delfast
Thursday 19th July In Girls Model School, Beltast. ASSOCIATION
I understand that appropriate cheer clothing MUST be worn for safety and hair to be tied back. Fashion clothing and footwear are not permitted.
Please delete as appropriate:
I have enclosed the full amount of £60
I have enclosed a non refundable deposit of £20 to secure my child a place and agree to pay the full balance before or on the first day of the summer school.
Cheques payable to N.I.A.S.T.
Return to Mrs Karen Graham c/o Joey Dunlop Leisure Centre 33 Garryduff Road Ballymoney
BT53 7DB (mark your envelope UKCA Summer School)
2.22 / 22 (mark your official official)
Failure to pay at admission will result in non admittance.
Credit or debit card applications can be made online at www.ukca.org.uk

Book Now! www.ukca.org.uk