



LAND'S EDGE SYDNEY HARBOUR

SCHOOL HOLIDAY CAMPS BOOKING FORM

JULY 2010

CAMP NUMBER	DATES
Camp 1	Mon 5th - Thurs 8th July 2010

Cost - \$470 (including GST) per child

Two or more children from the same immediate family are eligible for a 10% discount.

Participant Numbers - Each camp has a minimum and maximum number of participants. Camps will not occur if minimum numbers are not met. Tentative bookings are not confirmed until Land's Edge receives a completed booking form, medical form/s and payment in full for each child attending camp.

Child/Children's Details

1) Surname: _____ Given Name: _____ Male/Female _____

_____ Date of Birth: _____ Age: _____ Camp #: _____

2) Surname: _____ Given Name: _____ Male/Female _____

_____ Date of Birth: _____ Age: _____ Camp #: _____

3) Surname: _____ Given Name: _____ Male/Female _____

_____ Date of Birth: _____ Age: _____ Camp #: _____



Parent/Guardian Details (and authorisation to collect child/ren)

1) Parent/Guardian Surname: _____ **Given name:** _____

Phone – home: _____ **mobile:** _____ **work:** _____

Relationship to child: _____

2) Parent/Guardian Surname: _____ **Given name:** _____

Phone – home: _____ **mobile:** _____ **work:** _____

Relationship to child: _____

Payment – 3 options

Number of children attending: _____ NB: Please contact office if you are eligible for a family discount

Total: \$ _____

<p>1. Cheque/Money order: Payable to Land's Edge NSW</p> <p>Cheque Number: _____</p>
<p>2. Credit Card: Please circle one - Bankcard / Mastercard / VISA</p> <p>Cardholders Name: _____</p> <p>Amount: \$ _____</p> <p>Card Number: _____ Expiry: ____/____</p> <p>Signature: _____ Date: ____/____/____</p>
<p>3. Direct Debit: Please fax/send remittance</p> <p>Account Name: Land's Edge NSW</p> <p>BSB 062 562</p> <p>Account Number: 10170189</p>



Confirmation

Please indicate how you would like confirmation sent to you:

Email address - _____

Fax number - _____

Post: please provide postal address if different from above. _____

If confirmation has not been received within a week please call.

Privacy

The information on this form is collected for the primary purpose of providing Holiday Care for your child/ren. Other purposes for collection are administrative matters and billing purposes, to ensure adequate medical care is given and to contact parent/guardians if required. If you choose not to complete all the questions on this form, it may not be possible for Land's Edge to provide Holiday Care for your child/ren. Personal information may be disclosed to Medical staff.

Cancellation Policy

Bookings may be altered and/or cancelled up until two weeks prior to the booked camp, without a fee being incurred. After this date any changes to bookings or cancellations will be charged at the regular fee unless a family from the waiting list can fill the position.

Forms

The following forms also need to be completed **FOR EACH CHILD**. They will automatically be sent to you once the booking form has been received. They are also available upon request before such time.

2. Medical Summary Sheet
3. Medical Form
4. Asthma Management Form
5. Allergic Reaction Management Form
6. Consent and Indemnity Form and Risk Warning

Land's Edge looks forward to welcoming your child/ren on our holiday camp!

HOW TO CONTACT LAND'S EDGE:

Sydney Harbour Director - Michele Naughton

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CHOWDER BAY NSW 2088

Email michele@landsedge.com.au
