



PLEASE RETURN YOUR COMPLETED BOOKING FORM
AND FULL PAYMENT TO:

Fantasy Kids Clubs
11 Orchard Croft, Horbury, Wakefield, West Yorkshire. WF4 5DD
Tel: 01924 281365 Email: info@fantasykidsclubs.co.uk
Website: www.fantasykidsclubs.co.uk

APPLICATION FORM

WORKSHOP NAME	
LOCATION	
DATE	
TIME	

CHILD DETAILS

FULL NAME			
ADDRESS			POSTCODE
HOME TEL NUMBER			
D.O.B		AGE ON WORKSHOP DAY	
PLEASE BRING AN ENERGY FILLED PACKED LUNCH AND REFRESHMENTS FOR EACH DAY. (Does not apply to half day clubs.) JUICE, MORNING FRUIT SNACK AND AFTERNOON BUSICUT WILL BE PROVIDED AT THE WORKSHOP. PLEASE GIVE FULL DETAILS OF ANY DIETARY REQUIREMENTS.			
ALLERGIES, DISABILITIES OR CONCERNS	NO	YES	IF YES PLEASE GIVE FULL DETAILS BELOW

PARENT/ GUARDIAN DETAILS

FULL NAME			
ADDRESS (IF DIFFERENT FROM ABOVE)			POSTCODE
HOME TEL NUMBER			
MOBILE NUMBER			
EMAIL ADDRESS			
RELATIONSHIP TO CHILD			

CONTACT NUMBER IN CASE OF EMERGENCY (PLEASE GIVE THE NAME OF A RELATIVE OR FRIEND)

NAME			
ADDRESS			POSTCODE
HOME TEL NUMBER			
MOBILE NUMBER			
RELATIONSHIP TO CHILD			

I DECLARE THAT THE INFORMATION GIVEN IN THIS APPLICATION FORM IS CORRECT AND HEREBY APPLY FOR A PLACE FOR THE ABOVE NAMED CHILD.

I HAVE ENCLOSED THE FULL PAYMENT REQUIRED TO CONFIRM A PLACE AT THE ABOVE CLUB.

I HAVE READ, UNDERSTOOD AND AGREE TO THE FANTASY KIDS CLUBS TERMS AND CONDITIONS.

I ALSO GIVE FULL PERMISSION FOR THE ABOVE NAMED CHILD TO HAVE THEIR PHOTOGRAPH TAKEN DURING ANY FANTASY KIDS CLUBS LED ACTIVITY. THE PHOTOGRAPHS MAY ONLY BE USED ON THE FANTASY KIDS CLUBS WEBSITE AND FOR OTHER ADVERTISEMENT PURPOSES CONCERNING FANTASY KIDS CLUBS.

I UNDERSTAND THAT MAKE A WISH ENTERTAINMENT RESERVE THE RIGHT TO EXCLUDE CHILDREN WHOSE BEHAVIOUR IS DISRUPTIVE.

SIGNED		PRINT NAME		DATE	
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PLEASE SEND YOUR COMPLETED FORM WITH YOUR FULL PAYMENT TO THE ADDRESS ABOVE

Where did you hear about us?	
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