



DETAILS:

First Name:

Surname:

Address:

Date of Birth:

Male: **Female:**

School Attended:

School Year:

PARENT / GUARDIAN'S DETAILS:

Mr: **Mrs:** **Miss:** **Other:**

First Name:

Surname:

**Telephone
Home:**

Mobile:

Work:

Email:

**SPECIAL, MEDICAL and or
RELIGIOUS NEEDS.**

**We would like your child to enjoy the
play-scheme as much as possible. If your child
has any special needs please detail below:**

MEDICATION:

MEDICAL CONSENT:

**I consent to any medical treatment being given
in the event of any emergency:**

YES: **NO:**

**I agree to my child being photographed while attending activities. I understand that photographs will
only be used for promoting Kids inc. and its website, and will not be shared with any other
companies or persons:**

YES: **NO:**

EMERGENCY CONTACT DETAILS

It is highly important that we are able to contact you in the event of an emergency. Please ensure that all the numbers given are correct as un-contactable numbers could cause undue stress to your child.

EMERGENCY CONTACT 1

First Name:

Surname:

Telephone:

EMERGENCY CONTACT 2

First Name:

Surname:

Telephone:

EMERGENCY CONTACT 3

First Name:

Surname:

Telephone:

ANY OTHER INFORMATION:

If you know of any other information regarding your child which you feel is important please give details:

SIGNED:

DATE:

I agree to the terms and conditions of Kids inc.

BOOKING DATES:

EASTER	APRIL 2009		HALF TERM	MAY 2009	OCT 2009
Mon	6th <input type="checkbox"/>	13th <input type="checkbox"/>	Mon	25th <input type="checkbox"/>	22nd <input type="checkbox"/>
Tues	7th <input type="checkbox"/>	14th <input type="checkbox"/>	Tues	26th <input type="checkbox"/>	23rd <input type="checkbox"/>
Wed	8th <input type="checkbox"/>	15th <input type="checkbox"/>	Wed	27th <input type="checkbox"/>	24th <input type="checkbox"/>
Thurs	9th <input type="checkbox"/>	16th <input type="checkbox"/>	Thurs	28th <input type="checkbox"/>	25th <input type="checkbox"/>
Fri	10th <input type="checkbox"/>	17th <input type="checkbox"/>	Fri	29th <input type="checkbox"/>	26th <input type="checkbox"/>
Sat	11th <input type="checkbox"/>	18th <input type="checkbox"/>	Sat	23rd <input type="checkbox"/>	27th <input type="checkbox"/>
				30th <input type="checkbox"/>	

SUMMER HOLIDAYS		JUNE – JULY 2009				
Mon		29th <input type="checkbox"/>	6th <input type="checkbox"/>	13th <input type="checkbox"/>	20th <input type="checkbox"/>	27th <input type="checkbox"/>
Tues		30th <input type="checkbox"/>	7th <input type="checkbox"/>	14th <input type="checkbox"/>	21st <input type="checkbox"/>	28th <input type="checkbox"/>
Wed		1st <input type="checkbox"/>	8th <input type="checkbox"/>	15th <input type="checkbox"/>	22nd <input type="checkbox"/>	29th <input type="checkbox"/>
Thurs		2nd <input type="checkbox"/>	9th <input type="checkbox"/>	16th <input type="checkbox"/>	23rd <input type="checkbox"/>	30th <input type="checkbox"/>
Fri		3rd <input type="checkbox"/>	10th <input type="checkbox"/>	17th <input type="checkbox"/>	24th <input type="checkbox"/>	31st <input type="checkbox"/>
Sat	27th <input type="checkbox"/>	4th <input type="checkbox"/>	11th <input type="checkbox"/>	18th <input type="checkbox"/>	25th <input type="checkbox"/>	

SUMMER HOLIDAYS		AUGUST – SEPTEMBER 2009					
Mon		3rd <input type="checkbox"/>	10th <input type="checkbox"/>	17th <input type="checkbox"/>	24th <input type="checkbox"/>	31st <input type="checkbox"/>	7th <input type="checkbox"/>
Tues		4th <input type="checkbox"/>	11th <input type="checkbox"/>	18th <input type="checkbox"/>	25th <input type="checkbox"/>	1st <input type="checkbox"/>	8th <input type="checkbox"/>
Wed		5th <input type="checkbox"/>	12th <input type="checkbox"/>	19th <input type="checkbox"/>	26th <input type="checkbox"/>	2nd <input type="checkbox"/>	9th <input type="checkbox"/>
Thurs		6th <input type="checkbox"/>	13th <input type="checkbox"/>	20th <input type="checkbox"/>	27th <input type="checkbox"/>	3rd <input type="checkbox"/>	10th <input type="checkbox"/>
Fri		7th <input type="checkbox"/>	14th <input type="checkbox"/>	21st <input type="checkbox"/>	28th <input type="checkbox"/>	4th <input type="checkbox"/>	11th <input type="checkbox"/>
Sat	1st <input type="checkbox"/>	8th <input type="checkbox"/>	15th <input type="checkbox"/>	22nd <input type="checkbox"/>	29th <input type="checkbox"/>	5th <input type="checkbox"/>	12th <input type="checkbox"/>

MONDAY – FRIDAY

- FULL DAY 9.00AM – 5.45PM 25euros
AM ½ DAY 9.00AM – 1.00PM 15euros
PM ½ DAY 2.00PM – 5.45PM 15euros

SATURDAY CLUB

- FULL DAY 10.00AM – 5.00PM 20euros
AM ½ DAY 10.00AM – 1.00PM 10euros
PM ½ DAY 2.00PM – 5.00PM 10euros

WEEKLY RATE

- FULL TIME MON-FRI 100euros

2ND CHILD DISCOUNT – 10%

3RD CHILD DISCOUNT – 15%

MONTHLY SUMMER DISCOUNT – 25%

***Please refer to terms and conditions for all discounts ***

PAYMENT

TO DISCUSS PAYMENT OPTIONS PLEASE CONTACT:

LISA WEST 662020677

lisa@costakidsinc.com

PLEASE ENSURE YOU HAVE READ AND UNDERSTAND OUR TERMS AND CONDITIONS BEFORE BOOKING YOUR CHILDS PLACE AT KIDS INC.