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| Easter Booking Form | 2024 |

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| **University of Cambridge Holiday Playscheme (UCHP)**  **Easter Playscheme 2024**  **Booking Form**  **Trumpington Meadows Primary School**  **Kestrel Rise, Trumpington, CB2 9AY** | **Child’s Details** | |
| **First Name**  **(Given Name)** |  |
| **Last Name**  **(Family Name)** |  |
| **Known As** |  |
| **Date of Birth** |  |

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| **Rates**  **Group A** - University of Cambridge staff and students, Cambridge Assessment & Cambridge University Press Staff.  **Group B -** College Staff and College Teaching Officers at a University of Cambridge College.  **Group C** - General Public (those not in Group A or Group B).   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Group** | **Full Day** | |  | **Half Day** | | | **1st Child** | **Siblings** |  | **1st Child** | **Siblings** | | **A** | **£25 (£27.50)** | **£20 (£22.50)** |  | **£18 (£20.50)** | **£16.50 (£19)** | | **B** | **£28.50 (£31)** | **£23.55 (£26.05)** |  | **£19.50 (£22)** | **£17.25 (£19.75)** | | **C** | **£31.50 (£34)** | **£26 (£28.50)** |  | **£21.50 (£24)** | **£19 (£21.50)** |   The prices in brackets are the cost after the booking period has closed\*. These include an additional administration fee of £2.50 per child per day. |

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| **Registering Parent/Carer Details** | | **Association to the University of Cambridge** | |
| **First Name**  **(Given Name)** |  | **UC Staff**  **(Group A)**  **UC Student**  **(Group A)**  **Cambridge Assessment / Cambridge University Press** (**Group A)** | **College Staff (including fellows) (Group B)**  **College Teaching Officer**  **(Group B)** |
| **Last Name**  **(Family Name)** |  |
| **Title** |  | **General Public**  **(Group C)** |
| **Relationship to Child** |  |

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| **Easter** | | **Full Day**  **8.15 – 17.45** | **Morning**  **8.15 – 1.00** | **Afternoon**  **12.30 – 17.45** | **Will this be your child’s first time at Playscheme?** |
| **Tuesday** | **2** |  |  |  | **Yes** |
| **Wednesday** | **3** |  |  |  |
| **Thursday** | **4** |  |  |  |
| **Friday** | **5** |  |  |  |
| **Monday** | **8** |  |  |  | **No** |
| **Tuesday** | **9** |  |  |  |
| **Wednesday** | **10** |  |  |  |
| **Thursday** | **11** |  |  |  |
| **Friday** | **12** |  |  |  |

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| **Updated Information** |
| Please supply new or updated additional information regarding your child. For example, this could include medical conditions, medication, dietary requirements, development in behavioural needs or any change to their family life that Playscheme should be informed of. |
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| UCHP has a duty to safeguard your child against harm and it is important for us to be informed of any changes in circumstances. |

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| Name | **Signature** | **Date** |
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| **Playscheme will accept an electronic or wet signature.** | | |

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| **For Office Use Only** | Child ID | Family ID | Date Processed |

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**\* Booking closes at 17.00 on 15th March 2024.**