

APPLICATION FORM FOR YEAR 1 – YEAR 8

PLEASE COMPLETE ONE FORM PER CHILD AND RETURN IT TO THE FINANCE DEPARTMENT WITH THE PAYMENT FOR SUMMER SCHOOL BY THE LATEST MONDAY 18TH JUNE 2018.

Please note that for each week of Summer School, there will be the following places;

- ❖ 32 places for Pre-School (Pre-School aged children who currently attend the Junior School.)
- ❖ 100 places Pre Reception (Born from 01.01.13 until 31.08.14) and Reception
- ❖ 150 places for Years 1-8

✚ Please note that Junior & Senior School children have priority until Monday 21st May thereafter Non Junior & Senior School children can apply. All Summer School places will be on a first come, first served basis.

✚ Please note that should you need to cancel your application for the Summer School, a 50% refund will only be given up until Monday 18th June 2018. After this date a refund will not be available.

PLEASE COMPLETE THIS FORM IN CAPTIAL LETTERS.

Child's details

| | |
|------------------|--|
| First Name | |
| Surname | |
| Date of Birth | |
| Class/Year Group | |

| | | | |
|---|--------------------------|------------------------|--------------------------|
| Week 1: 2 ND JULY – 6 TH JULY | <input type="checkbox"/> | Opt-in for shuttle bus | <input type="checkbox"/> |
| Week 2: 9 TH JULY – 13 TH JULY | <input type="checkbox"/> | Opt-in for shuttle bus | <input type="checkbox"/> |
| Week 3: 16 TH JULY – 20 TH JULY | <input type="checkbox"/> | Opt-in for shuttle bus | <input type="checkbox"/> |
| Week 4: 23 RD JULY – 27 TH JULY | <input type="checkbox"/> | Opt-in for shuttle bus | <input type="checkbox"/> |

- The Shuttle Bus service is available for the Years 1-8 children to take from the Junior School to the Senior School every morning at 7.30am and return them every day at 2.45pm. Please complete the relevant section below if you wish to opt-in to the Shuttle Bus service.

Receipt Number: _____ (Office use only)

Junior and Senior School children

My child is currently in class _____

Non Junior School children

My child currently attends _____ nursery/school.

- ❖ My child has registered to attend The Junior and Senior School in September 2018

The Junior & Senior School Children

| Years 1-8 |
|--|
| One week = 150 euros per week |
| Two weeks = 145 euros per week |
| Three weeks = 140 euros per week |
| Four weeks = 135 euros per week |
| Shuttle bus = €8 per week per child |

Non Junior School Children

| Years 1-8 |
|--|
| One week = 160 euros per week |
| Two weeks = 155 euros per week |
| Three weeks = 150 euros per week |
| Four weeks = 145 euros per week |
| Shuttle bus = €8 per week per child |

- If your child has registered to attend The Junior and Senior School in September 2018, they will be entitled to pay the fee of a Junior and Senior School child.
- There will be a single extra charge for all non-Junior & Senior School children of €12 to cover the cost of adding non-Junior & Senior School children to the school's insurance.
- There will be €10 discount for the second child in the family that is registered for 2 weeks or more
- **There is a 50% reduction** for families that have 3 or more children, for the 3rd and 4th child.

If your child has siblings attending Summer School, please complete below;

Name _____ Class _____

Name _____ Class _____

Name _____ Class _____

Please indicate whether you give consent for your child's photo to be used in any of the categories indicated.

(Only Non Junior School parents need to complete this section.)

✓ Tick – consent

X Cross - object

Displays within the school

School website and prospectus

School advertising

School media pages

If your child attends The Junior & Senior School, please only complete parents name, surname and mobile number.

If your child does not attend The Junior & Senior School, please complete all sections of this form.

Father's Details

| | |
|--------------|--|
| First Name | |
| Surname | |
| Home Phone | |
| Mobile Phone | |

Mother's Details

| | |
|--------------|--|
| First Name | |
| Surname | |
| Home Phone | |
| Mobile Phone | |

In the event that the parents cannot be contacted:

First Emergency Contact Person

| | |
|-----------------------|--|
| First Name | |
| Surname | |
| Relationship to child | |
| Home Phone | |
| Mobile Phone | |

Second Emergency Contact Person

| | |
|-----------------------|--|
| First Name | |
| Surname | |
| Relationship to child | |
| Home Phone | |
| Mobile Phone | |

Medical Conditions / Allergies / Medication/Disabilities

| |
|--|
| |
| |

IMPORTANT NOTE: No medication can be administered to any child/ren without a doctor's note.

Parent's signature

Date

PLEASE PRINT YOUR NAME _____

Sun Cream Permission Form

I agree to the following to help protect my child from the danger of the sun.

I give permission for The Junior and Senior School Staff to apply sun cream to my child if required during Summer School.

I agree to provide a suitable sun cream, labelled with my child's name.

I understand that my child should attend Summer School with sun cream already applied so the need for re-application is minimal.

Signature: _____

Permission for your child to leave the school premises during Summer School to take part in trips

During Summer School there will be trips in Week 2, 3 and 4.

I understand that this involves travelling on a bus.

I give permission for my child to attend these trips.

Signature: _____

Swimming Details

Complete the details below regarding your child's swimming ability:

Is a non-swimmer _____

Is a beginner (recently learned/lacks confidence) _____

Is a confident swimmer _____

Signature: _____

Reservation of Bus

I will require the bus to take my child to The Senior School and back every day _____

Signature