

LASK

February Holiday Club 2026

@ Our Lady's Primary School

Direct Telephone number: 07597 590878 Email: lask.wellingborough@gmail.com
 Registration number: EY563524 Website. - www.laskoutofschool.co.uk

Name of child:.....

School Attended.....

Mon 16 th	Tues 17 th	Wed 18 th	Thurs 19 th	Fri 20 th
8.30 – 5.30pm	8.30 – 5.30pm	8.30 – 5.30pm	8.30 – 5.30pm	8.30 – 5.30pm

Please tick boxes above for days required please.

Lots of club activities/toys/equipment will be available as well as Lots of outdoor play and sports. + trips to park when good weather.

Please ring / email By 12th February Please. Thank You

The current fees and sessions (Including Snacks) are: £25 each child £20 each sibling.

Full session 8.30am-5.30pm @x £25

Sibling charge @.....x£20

Total payment for Holiday Club

For your child's session, please provide your child with a packed lunch. Packed Lunches need to be healthy, with **NO CHOCOLATE, SWEETS, FIZZY DRINKS OR ENERGY DRINKS**. LASK will provide a snack at approx. 10am & 2.30pm.

Payment methods:

Cash, Childcare vouchers, or BACS/Internet banking to **Patrick Franks, Virgin Money, Account number 70136597 Sort Code 82-61-37** using your child's name a reference.

For Childcare vouchers or BACS/Internet banking payments please write the date payment was sent here:

To guarantee a place for your child, booking forms with payment to be returned to LASK by **12th February Please**. Places are allocated on a first come, first serve basis. Places are limited.

LASK should be notified directly if your child will not be attending a booked session.

Amendments/Refunds/credits cannot be given for cancelled/non-attendance (unless agreed with the manager prior to booking).

Children not booked in cannot attend (staff ratios are calculated in advance)

*LASK will not take responsibility for child's personal belongings

**All children will be encouraged to participate, but this is not a compulsory activity, if children do not want to join in, that is fine.

I give permission for my child to participate in the activities planned by LASK. My child is permitted to leave the school premises for the organised activities and may travel on buses/mini buses/taxi organised by LASK (with LASK staff).

Parent/Carer Signature.....Parent's Name.....

Emergency contact number/s.....

Any medical information relating to outings or workshops -.....