

Time out club have a legal obligation to collect and process this information in accordance with The Regulation of Care (Requirements as to Care Services) (Scotland) Regulations 2002

Summer Booking Form 2026

Closing date for bookings 29th May 2026 thereafter any available places £30.00 late fee applies.

Cost: £41.95 per day per child & weekly charge £182.70 (5 full days)

Venue: Milngavie CE Centre

We are open from 8am for breakfast and close at 5.55pm

All children should have with them suitable outdoor clothing/shoes and a labelled packed lunch – Please remember we are a nut free zone.no nut products or traces of nuts in any foods

Please fill in all fields, if not applicable please state N/A

Child's Name	School attending
Home Address	
Postcode	main telephone
Email (will be used for correspondence, updates, ne	wsletters)
Parent/Carer	Relationship to child:
Work telephone	Mobile
Parent/Carer	Relationship to child:
Work telephone	Mobile
(Please ensure this person is aware their information, h Additional contact name	has been shared with TOC)
Telephone	Mobile

Days Requested (please ✓)

<u>Time-Out Club Closed June 26th re opens 13th July 26</u>											
Holiday Week 1		Holiday Week 2		Holiday Week 3			Holiday Week4				
Monday	July 13 th		Monday	July 20 th		Monday	July 27 th		Monday	Aug 3 rd	
Tuesday	July 14 ^h		Tuesday	July 21st		Tuesday	July 28 th		Tuesday	Aug 4 th	
Wednesday	July 15 th		Wednesday	July 22 nd		Wednesda	y July 29 th		Wednesday	Aug 5 th	
Thursday	July 16 th		Thursday	July 23 rd		Thursday	July 30 th		Thursday	Aug 6 th	
Friday	July 17 th		Friday	July 24 th		Friday	July 31 st		Friday	Aug 7 th	

Who will be collecting your child?

In addition to the parents/carers detailed - Who will be collecting your child/ren whilst at the Holiday Club

We require children to be accompanied (arriving and departing) with an adult over 16 years or sibling over 14 yrs.

	The require difficulties as assemblation (arriving difficulties) with an addition to your or stating over 11 years								
Name	Relationship to child								
Name	Relationship to child								
Name	Relationship to child								
Is there anyone who is not allowed to collect or have contact with your child									
Name	Relationship to child								
Name	Relationship to child								



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A phone call for verbal permission with an accurate description of the collector is required before releasing any child to anyone other than those noted above.

For your Information

Time-Out Club will record, process and keep personal information on you and your child in accordance with the General Data Protection Regulations 2018. If you have any questions about this, our data protection policies generally, please contact us by emails, phone.

We will send a text message to notify all parents/carers if your child has had an accident whilst at full day care. We will also give you the name of a staff member to discuss the accident with when you arrive to collect your child.

I give permission for my child (Please tick) you can withdraw consent for any of the permissions detailed at any time. Should you wish to withdraw consent, please discuss with the Manager of your setting in the first instance.

To participate in any mixed aged group indoor/outdoor physical activities	
Receive emergency first aid and visit dental hospital/ hospital in the case of any emergency	
Be photographed within TOC participating in activities.	
Any outdoor trips and outing to local woodland and parks	
I give consent to receive text messages and corresponding emails.	

I/we agree and accept that the personal data from this application (as detailed within the parent carer handbook), will be stored for no longer than necessary and kept secure.

All information above is correct and realise that any changes must be updated immediately Completion of the official enrolment form-is a formal agreement to a contacted placement at Time-Out Club with acceptance of all the policies, procedures, GDPR as set out in this parent/carer handbook

Time—out club reserves the right to withdraw a place or membership in terms of the exclusion/ withdrawal policy as set out in the parent handbook and Articles of Association.

I/We confirm that I have booked the above holiday places for my child and that payment will be made in advance.

I/We agree to accept a placement at Time-Out Club and accept the policies & contract as set out in the parent/carer handbook including that of child protection, fees and debt policy, no transfers or refunds will be given for days or TOC closing due to reasons out with their control.

If my	child is goi	ing to be	e absent, I/	We will	phone the	play	setting	before	10am to	notify	of their	absence.

Sig	gned Date	/

Holiday Club Password:

Please provide a password that will be unique to your family. You may be asked for this password when you collect your child/ren as the staff team rotate daily and may not know you. (Please ensure that all authorised person collecting are aware of password as this will be requested from staff upon collection of your child).



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<u>Highlighted important To be fill out – the rest as required</u>

Childs' Personal Plan

Child's	name							$\overline{}$
Date of	birth							
Physica	l description of your (Child's photograph						
Start da	ite							
		Н	ealth & Well	-being Details	5			
<mark>ls your (</mark>	<mark>child allergic to any o</mark>	f the follow	<mark>ving:</mark>					
Celery	cereals containing gluten	crustaceans	eggs	fish	lupin	milk	nuts	
mustard	sulphur dioxide sometimes known as sulph	ites)	peanuts	sesame seeds	soya	molluscs	NONE	
Please s	state any other allergi	es:						
State ar	ny dietary requiremen	its:						
Does yo	our child have a recog	gnised disal	bility/diagno:	sis of conditic	n?			
Does yo	our child have any me	edical condi	itions/Phobia	as?				
	tion required Yes/No	(please circ	cle)					
If yes w	hat is required:							
Namo	and Address of Family	, Doctor:						
Name a	and Address of Family	DOCTOL.						
Surgery	Telephone no:							
<u> </u>								
Are the	re any other profession	onals that a	re currently :	supporting yo	our child?			
	,		<u>, </u>	11 33				
In addit	ion:							
In the ir	nterests of continuity	of care for	your child, w	e may contac	t you for wri	tten permiss	sion to	
	the above named pro						nformation	
regardii	ng the support measu	ures and str	rategies they	have in place	e tor your chi	ild.		