

Childrens Playlink – Crèche Booking Confirmation



Name of Organisation requesting Crèche:

Contact Name:

Daytime Contact Telephone No:

Email:

Course Name & Venue address:
(Include contact name)

Course/Crèche Dates:

Number of weeks:

Day(s) of week

Please state the actual hours you want the crèche to be open for

Time(s):

Expected number of children/age ranges

Under 1 yr	1 – 3 yrs	3 – 8 yrs
<input type="text"/>	<input type="text"/>	<input type="text"/>

Staff ratios

1 adult to 3

1 adult to 4

1 adult to 8

Childrens Playlink to provide toys?

Yes

No

Address for invoice:

I have read the terms and conditions overleaf (including the cancellation terms) and am authorised to sign this form

Signed :

Date:

Please Print Name:

Please return signed form to:

Childrens Playlink, Fromside Youth Centre, Watleys End Road, Winterbourne, South Gloucestershire BS36 1QG

To be completed by Childrens Playlink:

Proposed Leader:
Proposed Staff:
Register:
Timesheets:
Accident Form:
Risk Assessment: