

BOOKING FORM - EASTER 2019

Child's Name:

Address:

School Attending:

Age of Child:

E-mail Address (confirmation sent by e-mail):

Telephone:

Mobile:

CONTACT NAME AND NUMBER IN CASE OF EMERGENCY

WEEK 1: 15/4/19 - 18/4/19 **WEEK 2: 23/4/19 - 26/4/19**

CAMP 1: ARTS & SPORTS CAMP

CAMP 2: MULTI-SPORTS & FITNESS CAMP

CAMP 3: BAKING & SEWING/KNITTING/EMBROIDERY/CROCHET CAMP

CAMP 4: LEGO/JUNIOR ENGINEERING/SCIENCE/CHESS CAMP

CAMP 5: STEM CAMP: SCIENCE/COMPUTER CODING/ENGINEERING/MATHS

CAMP 6: ANIMATION & ART CAMP

CAMP 7: FILM & CINEMATOGRAPHY & DRAMA CAMP

CAMP 8: CREATIVE WRITING/JUNIOR TOASTMASTERS/PRESENTATIONS

CAMP 9: IRISH CAMPS – OLD BELVEDERE RFC

CAMP 10: SPANISH CAMPS

CLASSES: PLEASE PLACE TICK IN BOX

READING **COMPREHENSION WORK** **HANDWRITING** **MATHS**

PLEASE GIVE DETAILS OF ANY RELEVANT MEDICAL INFORMATION PERTAINING TO YOUR CHILD:

Name of person(s) who will collect your child:

Parent's/Guardian's Signature:

(Cash/Cheques - Cheques should be made payable to Anne Ruane.)

Please return completed booking forms and fee to:

Anne Ruane,

Columbus Club, 30 Lower Leeson Street, Dublin 2.

ONLINE BOOKING AVAILABLE ON WEBSITE