



Fit and Fed

**FREE FUN ACTIVITY DAYS
WITH HEARTY BREAKFAST
AND LUNCH**

8-16 year olds



**Weekdays starting from Monday 6 April-Friday 17 April
(excluding Friday 10 and Monday 13 April), 10am –12.30pm.**



Isabella House Nursery, Longcroft Drive EN8 7PZ.

Pre booking is essential. Reserve your child's place by completing the form overleaf.

For more information, please email matthew.ridley@broxbourne.gov.uk, or call 01992 785555.



**BOROUGH OF
BROXBOURNE**
www.broxbourne.gov.uk



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CONSENT FORM

Fit and Fed is a free holiday programme for children aged 8-16 years old who are eligible for free school meals. Participants will have breakfast and lunch provided to them every day with lots of sporting activities on offer to keep them energised and active. Please return this form to: Community Development team, Broxbourne Council, Bishops' College, Churchgate, Cheshunt, Herts, EN8 9XF or bring it to the first session.

CHILD'S DETAILS

Name: Age: Date of birth:
Ethnicity: School:

PARENT/GUARDIAN DETAILS

Name of parent/guardian:
Telephone number:
Address: Postcode:

EMERGENCY CONTACT

Name:
Telephone number: Relationship to child:

MEDICAL DETAILS

Does your child have any medical requirements or need for additional support? ☐ Yes ☐ No
If yes, please state here:

Is your child currently taking any medication? ☐ Yes ☐ No
If yes, please state here:

Does your child have any dietary requirements/food allergies? ☐ Yes ☐ No
If yes, please state here:

Housing provider: ☐ B3Living ☐ Catalyst Housing Group ☐ Private landlord ☐ Other
Eligible for free school meals ☐ Yes ☐ No Photo and social media consent? ☐ Yes ☐ No

The information provided will be securely held by Community Development team and will be used for group purposes only. Details will not be given to third parties. Please notify the Community Development team of changes to the information provided by calling 01992 785555.

Medical Consent

While I appreciate that every attention will be given to personal safety, in the event of an accident, I permit the staff present to authorise any medical treatment which they deem necessary.

Signed (parent/guardian): Date:

Please print name: