

SUMMER SCHEME 2022 : Ballytober Primary School

Name of child: _____

Class in September 2022-23 : _____

Names of parents/guardians : _____

Address : _____

Contact numbers in case of an emergency :

Name: _____

Name: _____

Number: _____

Number: _____

Relationship to child: _____

Relationship to child: _____

Dietary requirements or medication needs :

Allergies :

Doctor's surgery & name: _____

Telephone number: _____

Signed: _____ Parent/Guardian