

This trip is for families on means tested benefits (e.g. JSA, Tax Credits, ESA, Housing Benefit, Carer's Allowance and Universal Credit). We may ask for proof of receipt of benefits before you fill-in this form.

Summer Outings Booking Form

Fishers Farm Adventure Park

Saturday 25th August

To request places for your family on this trip please fill-in this form, read the notes and sign overleaf your consent to our conditions for the trip overleaf.

Parent/Guardian accompanying the child or children*

Name	Address	Phone No:

Number of children	
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Age of Child 1	
Age of Child 2	
Age of Child 3	
Age of Child 4	
Age of Child 5	

Please Note:

The coach will leave from outside CASE Central at

10.45am (Please ensure you are there well before 10-15am).

Coach should then return to Hollingdean by 5-30pm .

Parental Responsibility: Parents/Guardians are responsible for their own children.

Photographs: We shall be taken photographs of this outing. Such photographs are a vital part of our fundraising, which ensures we can provide free trips in the future. It is a condition of going on the outing that we have permission to take photos of you and your children during the trip for the purposes of publicity.

Cancellations: Please let us know as soon as possible if for any reason you are unable to come on the trip so we can allow other families can take your place.

Confirmation: *Although we will make every effort to ensure those who book obtain a place on the trip this cannot be absolutely guaranteed. A confirmation letter will be sent out a week before the trip.*

* Spaces on the trip are limited. In order to ensure that as many children are able to go on the trip we confine the number of adults to one per family. However, we may lift this restriction if you or children have special needs or disabilities that require the support of another adult. Please see overleaf.

Do you or your family have any special needs or requirements?
if so fill-in below

Adults required to support you or your family

Name	Address (if different from above)	Phone (if different from above)

Have you or your family any other special needs or requirements that you think we need to know?

Please write your name and sign below and return this form by: 9th July

I(BLOCK CAPITALS) being the parent or legal guardian of the children named above give my consent for them to participate in the above selected outing organized by Community Advice Support Education. I understand that whilst the staff and volunteers will take all reasonable care of my child(ren) no agent of CASE necessarily will be held responsible for any loss or injury incurred by my child(ren) as a result of the activity unless they have been negligent . I also give my consent for any emergency medical treatment that may be required in case of an accident.

SIGNED DATE

Please note: In accordance with our retention policy we will store this form in a secure place for eight years. All personal information will be kept strictly confidential and secure.

Do you want to us tell you about future events?

I(BLOCK CAPITALS) consent to the contact details I've provided may be used to inform me of future events and outings organised by CASE.
I understand that I can withdraw this consent by contacting CASE at any time.

SIGNED DATE