

Adventure Cruise Holiday Club will run on Monday 17<sup>th</sup> and Tuesday 18<sup>th</sup> February 2014 at All Saints' Church Hall, Vicarage Gate, Onslow Village, GU2 7QJ from 9.30am until 12.15pm each day. (You need to come both days). Everyone is welcome - you don't have to come to church to join in!

If you are in **school year 6**, come and find out a bit about some characters from the Bible and how Jesus changed their lives. **However, for most of the morning, you will be doing some different activities this year - a trip to the climbing wall at Surrey Sports Park and a treasure hunt!** We have to make a small total charge for these activities of £7 per child total to cover both days. Please enclose your money with your application form (cheques payable to 'All Saints' Church Guildford'). There will also be an additional permission form that will be sent out when your place is confirmed.

Spaces are limited - so book now! (**Closing date 19<sup>th</sup> January**) Complete the form opposite and send/email/drop through the door to:

Adventure Cruise  
c/o Mrs Lucy Wallis  
6 Iveagh Road  
Guildford  
GU2 7PU

Applications will be confirmed by letter.

Any questions?

Call Lucy on 01483 302122 or email:  
office@allsaintschurchgfd.org.uk

## Application Form

Child's name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Current School & School Year: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_

Daytime contact number (if different): \_\_\_\_\_

Second emergency contact person & number (if we can't get hold of you):

Medical details:

Any allergies/medical issues (give brief details and if necessary we will give you a more detailed form to complete):

Any special needs: \_\_\_\_\_

I give permission for photographs of my child to be used in any All Saints' publicity or publication including websites and media press releases. **YES/NO\*** (\*delete as necessary) (No individuals will be named in any articles/photos)

I give my consent for medical treatment or first aid arising out of illness or accident. **YES/NO\*** (\*delete as necessary)

Parent/Guardian's Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_