

Exeter & Dartington

c/o Ellen Tinkham School

Hollow Lane, Exeter EX1 3RW

Tel: 01392 463823

Email: admin@hollowlane.org.uk

**Parent / Carers Contact Details:**

**Name: …………………………………………………………………………………………………….**

**Address: …………………………………………………………………………………………………….**

 **…………………………………………………………………………………………………….**

**Tel No: …………………………………………………………………………………………………….**

**Email: …………………………………………………………………………………………………….**

**Child 1 Name: …………………………………………….. Date of Birth: …………………..**

**Child 2 Name: …………………………………………….. Date of Birth: …………………..**

**Child 3 Name: …………………………………………….. Date of Birth: …………………..**

Do any of the children have any extra needs that we should know about?

Please circle the dates that you would like.

(Use different colours if you want separate dates for different children)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **Week 1** | 1st August | 2nd August | 3rd August | 4th August | 5th August |
| **Week 2** | 8th August | 9th August | 10th August | 11th August | 12th August |
| **Week 3** | 15th August | 16th August |  |  |  |

**PLEASE COMPLETE AND RETURN THIS FORM TO DEB WARD VIA EMAIL** **admin@hollowlane.org.uk** **OR TO MARIE QUINN AT BIDWELL BROOK SCHOOL**

**BY MONDAY, 14TH FEBRUARY. THANK YOU.**