

Lydalls Chameleon Club Booking Form

- Child's name _____
- Child's date of birth _____
- Parent's name _____
- Address and postcode _____
- Contact number _____

Day	Session(s) required	Start date	End date
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

I have read and agreed to the terms and conditions for this booking.

Printed Name _____

Signed _____

Date _____

Please complete and return this form to Chameleon Club