



*The
Chelsea Burley
Trust*

Respite Break Application Form

All sections of this form must be completed in full or we may not be able to process your application.

By submitting an application, you are confirming that the respite break is suitable for the whole family at this time.

Before starting the application, please consider.

- The child must have been diagnosed or receiving active treatment for brain tumours or cancer in the last 12 months.
- If the respite break falls in school term, we strongly recommend you approach the school to request the time off in advance of making the application. If requested, we can write a supporting letter.
- The respite break should not put the family under any additional financial pressure.

Childs Name

Who Is Making This Application?

Full Name Relationship to Child

Daytime Telephone Mobile

Email

About The Child

Full Name

Date of Birth / / Age Gender

Home Address Postcode

Diagnosis and Treatment

Diagnosis Diagnosis Date / /

On Active Treatment. Yes NO

If No, Date of Last Active Treatment / /

Hospital Physician For Child

Parents, Siblings & Guests

Please give details of all the other guests going on the respite break, to the maximum of 7.

Full Name	Position in Family	Gender	Age

Holiday Duration & Dates

All holidays will begin on either a Friday or a Monday. You can request 3 nights (for Friday arrivals only), 4 nights (for Monday arrivals only) or 7 nights (for Monday or Friday arrivals only). Please provide three choices of check-in dates.

Arrival date 1 3 nights 4 nights 7 nights

Arrival date 2 3 nights 4 nights 7 nights

Arrival date 3 3 nights 4 nights 7 nights

Emergency Contact

This person will only be contacted in the event of an emergency while you are away. Please give the name and telephone number of someone who is easily contactable.

Full Name Telephone

Relationship to Family

Data protection

As a charity we would like to promote our work for young children and families, in order for us to support families through our Respite breaks, it is important that we show the public how the money they raise helps. We would like to share your family's story, photos and videos.

Please send us your photos and videos from your holiday. We would love to show how many families we can support and how the people who donate help them too. You can share them on our Facebook page The Chelsea Burley Trust or email them us at thechelseaburleytrust@gmail.com

Occasionally, The Chelsea Burley Trust may be approached by the media to talk about its work. This will always raise the trust's profile, which could help us assist more families in the future. Please be assured that we will never pass your contact details to a third party. Would your family be willing to represent The Chelsea Burley Trust in either a photograph, radio, on tv or by just talking to a journalist?

Yes No **This will not affect the outcome of your application.**

Where did you hear about The Chelsea Burley Trust and our services?

Declaration

I declare that the information given on this form is correct and true to the best of my knowledge.

Signature Date / /

Please send your completed application form to:

The Chelsea Burley Trust
14 North Walk
Stoke-On-Trent
Meir
ST3 6DB

Or you may email it to: thechelseaburleytrust@gmail.com



Registered Charity Number
1174744(England & Wales)