

AFTER SCHOOL CLUB

BOOKING FORM

Child's Name:			
Term Beginni	ing:		
Sessions requ	uired (please tick):-		
Monday	3.20 pm – 4.30pm	4.30 pm – 5.30 pm	7
	£4.75	£4.75	
Tuesday	3.20 pm – 4.30pm	4.30 pm – 5.30 pm	_
	£4.75	£4.75	
Wednesday	3.20 pm – 4.30pm	4.30 pm – 5.30 pm	-
	£4.75	£4.75	
Thursday	3.20 pm – 4.30pm	4.30 pm – 5.30 pm	-
	£4.75	£4.75	
Friday	3.20 pm – 4.30pm	4.30 pm – 5.30 pm	-
	£4.75	£4.75	
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I confirm that should my child be unable to attend any of the above sessions (due to illness			
		on as practicably possible. I	understand that this is a
requirement in accordance with the ASC's legislative duties.			
SignedParent/Guardian			
Print Name			
Date			
Contact Number			