## After School Club Booking Form

Please note that once you commit to this booking by signing below, you are required to give 7 days notice to cancel or you will be charged for the session. This does not include if your child is absent due to illness or a school activity.

Please tick the days you required your child/ren to be booked in.

Name of child/rei	 n:			
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
•	•	·	•	•
Week Beginning:		•		
Monday	Tuesday	Wednesday	Thursday	Friday
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
	_			
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
Week Beginning:		<del>_</del>		<del>,</del>
Monday	Tuesday	Wednesday	Thursday	Friday
Week Beginning:				
Monday	Tuesday	Wednesday	Thursday	Friday
Signed:		•••••	Date:	
Print name:				
Please tick is you wish for your child/ren to be booked in for the				
whole academic year.				
	•			
or to run between (date) and (date)				