

Ad hoc Booking Form

Month: *June 2019*

|  |  |  |
| --- | --- | --- |
| Date: | Breakfast Club (£4.65) | After School Club (£10.95) |
| Monday 3rd |  |  |
| Tuesday 4th |  |  |
| Wednesday 5th |  |  |
| Thursday 6th |  |  |
| Friday 7th |  |  |
|  |  |  |
| Monday 10th |  |  |
| Tuesday 11th |  |  |
| Wednesday 12th |  |  |
| Thursday 13th |  |  |
| Friday 14th |  |  |
|  |  |  |
| Monday 17th |  |  |
| Tuesday 18th |  |  |
| Wednesday 19th |  |  |
| Thursday 20th |  |  |
| Friday 21st |  |  |
|  |  |  |
| Monday 24th |  |  |
| Tuesday 25th |  |  |
| Wednesday 26th |  |  |
| Thursday 27th |  |  |
| Friday 28th |  |  |
|  |  |  |

*Please tick your requested sessions & make payment immediately*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name/s of Children: |  | | | |
| Date/s of Birth: |  | | | |
| Name of parent/carer: |  | | | |
| Home Address: |  | | | |
| Email address: |  | | | |
| Telephone number: |  | | | |
| Please circle payment type: | BACS | Childcare Vouchers | Cash (exact amount) | Cheque |
| Signature: |  | | | |
| Date: |  | | | |

For staff use only:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Invoiced |  | Registers |



Ad hoc Booking Form

Month: *July 2019*

|  |  |  |
| --- | --- | --- |
| Date: | Breakfast Club (£4.65) | After School Club (£10.95) |
| Monday 1st |  |  |
| Tuesday 2nd |  |  |
| Wednesday 3rd |  |  |
| Thursday 4th |  |  |
| Friday 5th |  |  |
|  |  |  |
| Monday 8th |  |  |
| Tuesday 9th |  |  |
| Wednesday 10th |  |  |
| Thursday 11th |  |  |
| Friday 12th |  |  |
|  |  |  |
| Monday 15th |  |  |
| Tuesday 16th |  |  |
| Wednesday 17th |  |  |
| Thursday 18th |  |  |
| Friday 19th |  |  |
|  |  |  |
| Monday 22nd |  |  |
| Tuesday 23rd |  |  |
| Wednesday 24th |  | **Wednesday 24th July – Fri 30th Summer Holiday Club – Please use our separate booking form!** |
| Thursday 25th |  |  |
| Friday 26th |  |  |
|  |  |  |

*Please tick your requested sessions & make payment immediately*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name/s of Children: |  | | | |
| Date/s of Birth: |  | | | |
| Name of parent/carer: |  | | | |
| Home Address: |  | | | |
| Email address: |  | | | |
| Telephone number: |  | | | |
| Please circle payment type: | BACS | Childcare Vouchers | Cash (exact amount) | Cheque |
| Signature: |  | | | |
| Date: |  | | | |

For staff use only:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Invoiced |  | Registers |