MEAD VALE COMMUNITY EXTENDED SCHOOL CLUB

MONTHLY BOOKING FORM

January 2019 **BOOKINGS & ENQUIRIES HOTLINE - 07796695842**

Child's full name: _____ _____

(SURNAME block letters) **LEGAL SURNAME**

(FORENAMES)

Date of Birth: _____

Home Address: _____

_____**POST CODE**:_____

Home Phone Number:_____ Mobile Phone No: _____

I WOULD LIKE MY CHILD TO ATTEND THE AFTER SCHOOL CLUB ON THE FOLLOWING DAYS.

		Please tick			**Please tick**
1st	TUES	BANK HOLIDAY	19th		
2nd	WEDS	CHRISTMAS HOL	20th		
3rd	THURS	CHRISTMAS HOL	21st	MON	
4th	FRI	CHRISTMAS HOL	22nd	TUES	
5th			23rd	WEDS	
6th			24th	THURS	
7th	MON		25th	FRI	
8th	TUES		26th		
9th	WEDS		27th		
10th	THURS		28th	MON	
11th	FRI		29th	TUES	
12th			30th	WEDS	
13th			31st	THURS	
14th	MON				
15th	TUES				
16th	WEDS				
17th	THURS				
18th	FRI				

(PLEASE MAKE CHEQUES PAYABLE TO "Extend Learning Academies Network")

Cost - £9 per child per session

Signed ……. Parent/Adult with parental responsibility

Date ……..