



BOOKING FORM

Week beginning:	
Name of child/children:	
<i>Tick which days your child/children will be attending next week:</i>	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
TOTAL COST @ £3.00 per day	£ <i>Cash/cheque enclosed?</i>
<i>For first timers only</i> - Please indicate any medical or dietary requirements:	
Signed:	
<i>Please complete and return form with full payment by 9.00am Friday prior to the week.</i>	