



**School After School Club  
Booking Form 2018-2019**

Child's Name ..... Class .....

I wish my child to attend the After School Club on the following days:-

Monday	Tuesday	Wednesday	Thursday	Friday	
1 hr	1 hr	1 hr	1 hr	1 hr	Food not available for 1 hour bookings
2 hrs	2 hrs	2 hrs	2 hrs	2 hrs	
3 hrs	3 hrs	3 hrs	3 hrs	3 hrs	
With food	with food	with food	with food	with food	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

**(Please tick as required)**

Date(s).....

I understand I am committed to pay for this booking at a cost of £4.50 per child per hour (starting at 3.15pm up until 6.15pm). **This must be paid for on or before the dates required.**

**If this is your first booking for the After School Club, please also complete the details below along with a copy of the clubs terms & conditions form.**

Has your child any food allergies or other dietary requirements? Yes/No

If yes, what are they? \_\_\_\_\_

**Password** (Person who picks up needs to know it): \_\_\_\_\_

Please give your emergency contact for these sessions:-

Name \_\_\_\_\_

Email address: \_\_\_\_\_

Relationship to child \_\_\_\_\_

Mobile Number \_\_\_\_\_

Landline \_\_\_\_\_

**Signed** \_\_\_\_\_

**Date** \_\_\_\_\_

Please email to [asc@bussage.gloucs.sch.uk](mailto:asc@bussage.gloucs.sch.uk)