**AFTER SCHOOL CLUB - BOOKING FORM 2024/25**

The After School Cluboperates every afternoon each week from **3.15pm – 4.30pm or 5.30pm** term time only.

The cost per session is **£5.50 until 4.30pm, or £7.50 until 5.30pm,** including an optional snack.

**Please Note:**

* **You will be charged £7.50 if your child is collected after 4.30pm**
* **Final pick up is 5.30pm– a late penalty charge of £5.50 will be incurred for late collections**

Please specify a start date and indicate which days and sessions you require by ticking the boxes below:

**Start date: ………………………………………………………….**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **TIME** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **3.15pm – 4.30pm** |  |  |  |  |  |
| **3.15pm – 5.30pm** |  |  |  |  |  |

**Child’s name …..…………………………………………………………………………….**

**2nd Child’s name …………………………………………………………………………...**

**3rd Child’s name …………………………………………………………………………….**

**Please tick this box if you require the above booking to continue from the start date until the end of the current academic year** [in-year adjustments can be made for the next term by completing a new booking form before the end of the term prior to the required change]

• **I understand that sessions are paid for in advance and no refunds are given for absences or cancellations.**

• I shall inform the school office by midday if I need to cancel a session or collect my child early (no refunds).

• **I understand that regular bookings are invoiced termly in advance (except Term 1 invoices which will be sent out as early as possible), and ad hoc bookings are invoiced monthly in arrears.**

• **I understand that the preferred method of payment is by bank transfer to 30-93-48 78786963 (please quote your invoice number as the reference).**

• I understand that session times will be 3.15pm – 4.30pm or 3.15pm – 5.30pm, and I also understand the different costs involved and the charges made for late collection (as described above).

• I understand my child will be given a snack, such as cheese & biscuits, crumpets, carrots/cucumber sticks etc, and a drink at 3.30pm. Dietary requirements for individual children can discussed with Club staff, including allergies.

• I agree to keep a child away from the club if s/he is sick or if advised to do so by a doctor and/or staff members (vomiting and diarrhoea must be clear for 48 hours).

• I have read the After School Club Terms and conditions, as detailed above, and accept these terms and conditions for all regular and ad hoc bookings made.

Signed: ………………………………………………………… Name: ……………………………………………………………………

Date: …………………………………………………………… Telephone Number: ……………………………………………….

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| FOR OFFICE USE | |
| BOOKED |  |

**FOR OFFICE USE ONLY**

**INVOICES**

**TERM 1**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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**TERM 2**

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| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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**TERM 3**

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| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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**TERM 4**

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| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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**TERM 5**

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| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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**TERM 6**

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| **INVOICE DATE** | **INVOICE AMOUNT** | **INVOICE NO** | **AMOUNT PAID** | **BACS/Cash** | **DATE PAID** |
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