



RAVENSDALE JUNIOR SCHOOL  
DECEMBER 2018  
AFTER SCHOOL CLUB BOOKING FORM

Child's name ..... Class .....

Emergency contact details between 3.15pm – 6.00pm

Name:.....Telephone number.....

Allergies: .....

Please highlight when a place is required on the calendar by **Friday 23<sup>rd</sup> November**

	Monday	Tuesday	Wednesday	Thursday	Friday
December	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>
December	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	13 <sup>th</sup>	14 <sup>th</sup>
December	17 <sup>th</sup>	18 <sup>th</sup>	19 <sup>th</sup>	20 <sup>th</sup>	21 <sup>st</sup>

I enclose a cheque (made payable to Derby City Council) for £ ..... total amount for ..... sessions at £9.00 a day OR payment will be made using childcare vouchers from the following company .....

I understand no refunds will be made due to absence or cancellation.

Signed: ..... Parent/carer

Please print name: .....

Email address: .....

PLEASE RETURN THIS FORM TO MRS M ALBUTT AS SOON AS POSSIBLE TO RESERVE A PLACE  
admin@ravensdalej.derby.sch.uk