



RAVENSDALE JUNIOR SCHOOL  
BREAKFAST CLUB BOOKING FORM

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

Emergency contact details:

Name: .....

Contact details (between 7.45am and 8.45am) .....

Allergies: .....

Please highlight when a place is required on the calendar and return by **Monday 20<sup>th</sup> May**.

	Monday	Tuesday	Wednesday	Thursday	Friday
June	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>	6 <sup>th</sup>	7 <sup>th</sup>
June	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>	13 <sup>th</sup>	14 <sup>th</sup>
June	17 <sup>th</sup>	18 <sup>th</sup>	19 <sup>th</sup>	20 <sup>th</sup>	21 <sup>st</sup>
June	24 <sup>th</sup>	25 <sup>th</sup>	26 <sup>th</sup>	27 <sup>th</sup>	28 <sup>th</sup>
July	1 <sup>st</sup>	2 <sup>nd</sup>	3 <sup>rd</sup>	4 <sup>th</sup>	5 <sup>th</sup>
July	8 <sup>th</sup>	9 <sup>th</sup>	10 <sup>th</sup>	11 <sup>th</sup>	12 <sup>th</sup>
July	15 <sup>th</sup>	16 <sup>th</sup>	17 <sup>th</sup>	18 <sup>th</sup>	19 <sup>th</sup>
July	22 <sup>nd</sup>	23 <sup>rd</sup>	24 <sup>th</sup>	25 <sup>th</sup>	

I enclose a cheque (made payable to Derby City Council) for £ ..... total amount for ..... sessions at **£4.50** 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 RETURN THIS FORM TO MRS M ALBUTT AS SOON AS POSSIBLE TO RESERVE A PLACE  
admin@ravensdalej.derby.sch.uk

**PLEASE REMEMBER: ALL CHILDREN MUST BE SIGNED IN BY AN ADULT**