

## Booking Form for CNS After School Sports Clubs and Child Care

When making your first booking for our provision please complete the following two pages.

 <b>Day/Club/Date</b>	 <b>CNS Sports Club <u>ONLY</u></b> (just for Y1 to Y6) 3.15-4.15pm <b>£2.50</b>	<b>CNS Sports Club/Activities <u>AND</u></b> Extra Provision 3.15-5.30pm <b>£6.50</b>	Another school club followed by the extra CNS provision 4.15-5.30pm <b>£4</b>	Child Care for child in Reception from 3:15 to 5:30 pm. <b>£6.50</b>	
Monday – Small ball games	29-Oct				
Tuesday – Multi Sport	30-Oct				
Wednesday – Hockey	31-Oct				
Thursday – Dodgeball	01-Nov				
Friday - Apparatus	02-Nov				
Monday – Small ball games	05-Nov				
Tuesday – Multi Sport	06-Nov				
Wednesday – Hockey	07-Nov				
Thursday – Dodgeball	08-Nov				
Friday - Apparatus	09-Nov				
Monday – Small ball games	12-Nov				
Tuesday – Multi Sport	13-Nov				
Wednesday – Hockey	14-Nov				
Thursday – Dodgeball	15-Nov				
Friday - Apparatus	16-Nov				
Monday – Small ball games	19-Nov				
Tuesday – Multi Sport	20-Nov				
Wednesday – Hockey	21-Nov				
Thursday – Dodgeball	22-Nov				
Friday - Apparatus	23-Nov				
Monday – Small ball games	26-Nov				
Tuesday – Multi Sport	27-Nov				
Wednesday – Hockey	28-Nov				
Thursday – Dodgeball	29-Nov				
Friday - Apparatus	30-Nov				
Monday – Small ball games	03-Dec				
Tuesday – Multi Sport	04-Dec				
Wednesday – Hockey	05-Dec				
Thursday – Dodgeball	06-Dec				
Friday - Apparatus	07-Dec				
Monday - Small ball games	10-Dec				
Tuesday – Multi Sport	11-Dec				
Wednesday – Hockey	12-Dec				
Thursday – Dodgeball	13-Dec				
Friday - Apparatus	14-Dec				
Monday – Small ball games	17-Dec				
Tuesday – Multi Sport	18-Dec				
Wednesday – Hockey	19-Dec				
Thursday – Dodgeball	20-Dec				
Friday - Apparatus	21-Dec				
<b>Total Payment</b>		£	£	£	£

Tick as appropriate - Payment can be made via BACS/cheque/cash

Please circle which method of payment you will use – BACS                      Cheque    Cash

Password

As an extra measure of security please create a password for your child. This will be known by the person picking your child up and will be asked for by a member of staff if they do not recognise this person.

Name of child: \_\_\_\_\_

Password: \_\_\_\_\_

Names of people who will collect my child/children and their contact details:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Please details below any dietary or allergy requirements:

Declaration

I agree to the terms and conditions regarding arrival and departure procedures.

I agree to the terms and conditions including that all fees are payable in advance and any session changes are made in advance.

I agree that any medical information the school hold can be shared with CNS Sports Stars

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Parent of: \_\_\_\_\_ Year \_\_\_\_\_

Contact: \_\_\_\_\_

Date: \_\_\_\_\_