



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.

 		CNS Sports Club ONLY (just for Y1 to Y6) 3.15-4.15pm £2.50	CNS Sports Club/Activities AND Extra Provision 3.15-5.30pm £6.50	Another school club followed by the extra CNS provision 4.15-5.30pm £4	Child Care for child in Reception from 3:15 to 5:30 pm. £6.50
Day/Club/Date					
Monday – Tag Rugby	03-Sep				
Tuesday – Multi Sport	04-Sep				
Wednesday – Hockey	05-Sep				
Thursday – Dodgeball	06-Sep				
Friday - Apparatus	07-Sep				
Monday – Tag Rugby	10-Sep				
Tuesday – Multi Sport	11-Sep				
Wednesday – Hockey	12-Sep				
Thursday – Dodgeball	13-Sep				
Friday - Apparatus	14-Sep				
Monday – Tag Rugby	17-Sep				
Tuesday – Multi Sport	18-Sep				
Wednesday – Hockey	19-Sep				
Thursday – Dodgeball	20-Sep				
Friday - Apparatus	21-Sep				
Monday – Tag Rugby	24-Sep				
Tuesday – Multi Sport	25-Sep				
Wednesday – Hockey	26-Sep				
Thursday – Dodgeball	27-Sep				
Friday - Apparatus	28-Sep				
Monday – Tag Rugby	01-Oct				
Tuesday – Multi Sport	02-Oct				
Wednesday – Hockey	03-Oct				
Thursday – Dodgeball	04-Oct				
Friday - Apparatus	05-Oct				
Monday – Tag Rugby	08-Oct				
Tuesday – Multi Sport	09-Oct				
Wednesday – Hockey	10-Oct				
Thursday – Dodgeball	11-Oct				
Friday - Apparatus	12-Oct				
Monday – Tag Rugby	15-Oct				
Tuesday – Multi Sport	16-Oct				
Wednesday – Hockey	17-Oct				
Thursday – Dodgeball	18-Oct				
Friday - Apparatus	19-Oct				
Total Payment		£	£	£	

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 _____

Date: _____