



Lillington Nursery and Primary School

AFTER-SCHOOL CLUB Booking Form

Child's Name: _____ Class: _____

Child's Name: _____ Class: _____

Month: **April 2021**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
			1	2
5 April to 16 April EASTER BREAK				
19	20	21	22	23
26	27	28	29	30

1. My child will attend on all the above school dates.
2. Please tick against individual dates that you would like your child to attend after-school club..
3. Please return this form to ensure a place is allocated. Thank you.

I would like to pay via Sims Pay YES/NO

I would like to pay with childcare vouchers YES / NO

I would like to pay via National Savings Scheme YES/ NO

Reference Number _____



Lillington Nursery and Primary School

AFTER-SCHOOL CLUB Booking Form

Child's Name: _____ Class: _____

Child's Name: _____ Class: _____

Month: **May 2021**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
3 BANK HOL	4	5	6	7
10	11	12	13	14
17	18	19	20	21
24	25	26	27	28
31 May to 4 June HALF TERM				

1. My child will attend on all the above school dates. []
2. Please tick against individual dates that you would like your child to attend after-school club..
3. Please return this form to ensure a place is allocated. Thank you.

I would like to pay via Sims Pay YES/NO

I would like to pay with childcare vouchers YES / NO

I would like to pay via National Savings Scheme YES/ NO

Reference Number _____



Lillington Nursery and Primary School

AFTER-SCHOOL CLUB Booking Form

Child's Name: _____ Class: _____

Child's Name: _____ Class: _____

Month: **June 2021**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
31 May to 4 June HALF TERM				
7	8	9	10	11
14	15	16	17	18
21	22	23	24	25
28	29	30		

1. My child will attend on all the above school dates. []
2. Please tick against individual dates that you would like your child to attend after-school club.
3. Please return this form to ensure a place is allocated. Thank you.

I would like to pay via Sims Pay YES/NO

I would like to pay with childcare vouchers YES / NO

I would like to pay via National Savings Scheme YES/ NO

Reference Number _____



Lillington Nursery and Primary School

AFTER-SCHOOL CLUB Booking Form

Child's Name: _____ Class: _____

Child's Name: _____ Class: _____

Month: **July 2021**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
			1	2
5	6	7	8	9
12	13	14	15	16
19	20	21		
20 July to Sept 2021 SUMMER BREAK				

1. My child will attend on all the above school dates. []
2. Please tick against individual dates that you would like your child to attend after-school club.
3. Please return this form to ensure a place is allocated. Thank you.

I would like to pay via Sims Pay YES/NO

I would like to pay with childcare vouchers YES / NO

I would like to pay via National Savings Scheme YES/ NO

Reference Number _____