

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.

Name		CNS Sports Club <u>ONLY</u> (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
Monday – Just Dance	24-Feb				_
Tuesday – Multi Sport	25-Feb				
Wednesday – Apparatus	26-Feb				
Thursday – Dodgeball	27-Feb				
Friday - Curling	28-Feb				
Monday – Just Dance	2-Mar				
Tuesday – Multi Sport	3- Mar				
Wednesday – Apparatus	4- Mar				
Thursday – Dodgeball	5- Mar				
Friday - Curling	6- Mar				
Monday – Just Dance	9- Mar				
Tuesday – Multi Sport	10- Mar				
Wednesday – Apparatus	11- Mar				
Thursday – Dodgeball	12- Mar				
Friday - Curling	13- Mar				
Monday – Just Dance	16- Mar				
Tuesday – Multi Sport	17- Mar				
Wednesday – Apparatus	18- Mar				
Thursday – Dodgeball	19- Mar				
Friday - Curling	20- Mar				
Monday – Just Dance	23- Mar				
Tuesday – Multi Sport	24- Mar				
Wednesday – Apparatus	25- Mar				
Thursday – Dodgeball	26- Mar				
Friday - Curling	27- Mar				
Monday – Just Dance	30- Mar				
Tuesday – Multi Sport	31- Mar				
Wednesday – Apparatus	1-Apr				
Thursday – Dodgeball	2-Apr				
Friday - Curling	3-Apr				

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

CNS Bank Account Details are

Sort Code 20-83-69

Account Number 53665976

Please circle which method of payment you will use - BACS

Cheque Cash

<u>Password</u>

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
34
Please details below any dietary or allergy requirements:
<u>Declaration</u>
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: _____