

**After School Care - Booking form – Spring 2024 – Term 1**

**Name of Child/Children………………………………………………………………..**

**Please put a tick in the dates you require:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Monday** |  | **15th Jan** | **22nd Jan** | **29th Jan** | **5th Feb** |
| **Tuesday** | **9th Jan** | **16th Jan** | **23rd Jan** | **30th**  **Jan** | **6th Feb** |
| **Wednesday** | **10th Jan** | **17th Jan** | **24th**  **Jan** | **31st Jan** | **7th Feb** |