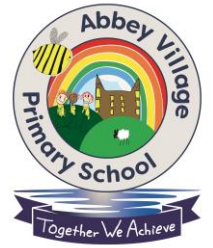


Abbey Village Primary School

September Return 2020

Wrap Around Care

Booking Form



Name: _____

	M	T	W	Th	F
W/C 2/9/2020 BC					
ASC					
W/C 7/9/2020 BC					
ASC					
W/C 14/9/2020 BC					
ASC					
W/C 21/9/2020 BC					
ASC					
W/C 28/9/2020 BC					
ASC					
W/C 5/10/2020 BC					
ASC					
W/C 12/10/2020 BC					
ASC					
W/C 19/10/2020 BC					
ASC					

Please tick the sessions you require.

I understand that submitting this form will secure a place for my child. You will be invoiced in full for all requested sessions.

Signed: _____