

'Every child will have confidence in their own self-worth and an aspiration to achieve.'



Marpool Primary School

Marpool Primary School
Moorfield Road
Exmouth
Devon
EX8 3QW

Head Teacher: Mrs. Rachel Pattison

Tel: 01395 263961

Email: admin@marpoolprimary.co.uk

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CONTRACT OF AGREEMENT After School Club - Booking Form

All after school club bookings must be accompanied with full payment as agreed in your original contract. These will be accepted for up to 1 month at a time and places will be withdrawn if payments are not received in advance. Thank you for your support with this and allowing us to continue to provide quality after school care for your child.

Child's Name:	Class:
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Child's Name:	Class:
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Child's Name:	Class:
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Week beginning:

Monday	Tuesday	Wednesday	Thursday	Friday
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Week beginning:

Monday	Tuesday	Wednesday	Thursday	Friday
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Week beginning:

Monday	Tuesday	Wednesday	Thursday	Friday
<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>	<input style="width: 100%; height: 20px;" type="text"/>

Week beginning:

Monday	Tuesday	Wednesday	Thursday	Friday
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Payment details
Sessions until 5.30pm are £7.00 per child.
Second or subsequent siblings pay a reduced cost of £6.00.

Number of sessions @ £7.00 = £

Siblings
 Number of sessions @ £6.00 = £

I have enclosed a payment for the Total £

Please make cheques payable to Devon County Council (DCC)

Signed: _____ Date: _____

Print Name: _____

Relationship to Child: _____
(Mother, Father, Carer etc).