|  |  |
| --- | --- |
| **Busy Bees** | **RIPPONDEN OUT OF SCHOOL CLUB** |
|  | REQUIREMENTS FOR TERM TIMESeptember 2020 – July 2021 (inclusive) |

PLEASE INDICATE THE SESSIONS YOU WILL BE REQUIRING AND RETURN TO THE CLUB

|  |  |
| --- | --- |
| Child’s Name (full) |  |

Please tick requirements below:

|  |  |  |
| --- | --- | --- |
|  | **Morning Session****7.30-9.00am****(£4.50 first child, £4 subsequent children)** | **Afternoon Session****3-6.00pm****(£7 first child, £6.50 subsequent children)** |
| **Monday** |  |  |
| **Tuesday** |  |  |
| **Wednesday** |  |  |
| **Thursday** |  |  |
| **Friday** |  |  |

**PAYMENT TERMS IN ADVANCE (please tick one of the below):**

MONTHLY …………………………………….. HALF TERMLY……………………………………………

**Signature of parent/guardian** …………………………………………………………………………………

**Weekly Rate** *(office use only) ………………………………*

|  |
| --- |
| **Email address for parents to receive invoices electronically:** |
| **WEEK NO** | **INVOICE NO** | **AMOUNT** | **PAID** | **COMMENT** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |