Queensway After School Club APPLICATION FOR ADMISSION & REGISTRATION 2023-2024



		Queensway
Child's Name: Date of birth:		
Home Addres	s:	
Postcode: Mobile/Home Number:		
Email:		
	per hour, per ch	my child to attend Queensway's After School Club. I understand that the cost iild, and that I will be charged a minimum of one hour's full care and every
Fees must be	e paid monthly	in advance.
Start Date:		
Please state	e exact times	and days required within the following sessions
		After School Childcare 3:05pm to 6:00pm (£3.50 per hour)
Monday	3:05pm	
Tuesday	3:05pm	
Wednesday	3:05pm	
Thursday	3:05pm	
Friday	3:05pm	
•		rink and healthy snack during the session. Hot light snacks are provided to all ay after 4:30pm.
•	s special needs ovisions to be m	s, please ensure this is discussed with staff at an early stage to enable nade.
	e ask that you s formation Book	sign and agree to the behaviour expectations at Queensway, details can be let to Parents'.
All care applied for on this form is for term time only.		
Please refer to further details.	'Queensway S	chool After School Club Contract and Information Booklet for Parent/Carers' for
Signed: Parent	:/Carer:	
Print Name:		
Date:		