



Tel: 01935 474224

email: penmill@educ.somerset.gov.uk website: www.penmillinfants.co.uk

Pen Mill Infant & Nursery Academy

Date:	
REQUEST TO START ATTENDING AFTER SCHOOL CLUB UNTIL 4:15 pm:	
Child's Name: Class:	
Child's Name: Class:	••••
I hereby give notice that the above named child/children would like to commence after school club the v beginning and confirm I have paid in advance and I would like my child/children to have attend the club	
Mondays Tuesdays Wednesdays Thursdays (Please tick appropriate boxes)	
I understand that after school club costs £2.00 per session, £8 per week and that this is payable in adverserably half-termly in advance, if not weekly.	/ance
If we do not receive payment in advance we will be unable to guarantee your child/children a place at A School Club.	fter
Our preferred method of payment is bank transfer to: account number: 44422060, sort code: 30-99-98	
Payment can also be made by cash or cheque at the school office. Cheques should be made pay to Pen Mill Infant and Nursery Academy.	able
I confirm I have paid for my child to attend in advance by cash/cheque/bank transfer (please circle one)	
Signed:Parent/Guardian	



Personal Details Form After School Club

Child's Name	
Parent/Carer Na	me
Address	
Contact tel numb	er
Please indicated	whether your child has any food allergies:
	your child has any medical conditions we need to be aware of
Parent/	Guardian