



# Perton Primary Academy Summer Holiday Club Booking Form

**Please complete this booking form, return it to the school office by  
Friday 10<sup>th</sup> July 2020.**

***50% discount applied to sibling***

Child's Name: \_\_\_\_\_ School/Yr. Group: \_\_\_\_\_ / \_\_\_\_\_

Child's Name: \_\_\_\_\_ School/Yr. Group: \_\_\_\_\_ / \_\_\_\_\_

*Any additional sessions required after submission of the booking form will be subject to availability.*

Dates	Half-day AM 7.30am – 12.30pm £15	Half-day PM 1.00pm – 6.00pm £15	Full Day 7.30am – 6.00pm £30
Monday 20 <sup>th</sup> July			
Tuesday 21 <sup>st</sup> July			
Wednesday 22 <sup>nd</sup> July			
Thursday 23 <sup>rd</sup> July			
Friday 24 <sup>th</sup> July			
Monday 27 <sup>th</sup> July			
Tuesday 28 <sup>th</sup> July			
Wednesday 29 <sup>th</sup> July			
Thursday 30 <sup>th</sup> July			
Friday 31 <sup>st</sup> July			
Monday 3 <sup>rd</sup> Aug			
Tuesday 4 <sup>th</sup> Aug			
Wednesday 5 <sup>th</sup> Aug			
Thursday 6 <sup>th</sup> Aug			
Friday 7 <sup>th</sup> Aug			
Monday 10 <sup>th</sup> Aug			
Tuesday 11 <sup>th</sup> Aug			
Wednesday 12 <sup>th</sup> Aug			
Thursday 13 <sup>th</sup> Aug			
Friday 14 <sup>th</sup> Aug			
Monday 17 <sup>th</sup> Aug			
Tuesday 18 <sup>th</sup> Aug			
Wednesday 19 <sup>th</sup> Aug			
Thursday 20 <sup>th</sup> Aug			
Friday 21 <sup>st</sup> Aug			

Monday 24 <sup>th</sup> Aug			
Tuesday 25 <sup>th</sup> Aug			
Wednesday 26 <sup>th</sup> Aug			
Thursday 27 <sup>th</sup> Aug			
Friday 28 <sup>th</sup> Aug			
Monday 31 <sup>st</sup> Aug	Closed		
Tuesday 1 <sup>st</sup> Sept			
<b>Total</b>	<b>£</b>	<b>£</b>	<b>£</b>

Payments can be made online via ParentPay, by bank transfer to Staffordshire University Academies Trust, Lloyds bank, 30-64-44, 33311068 or by childcare vouchers. Cash payments are not accepted. Cancelled sessions are non-refundable.

I confirm that my child named above will attend Perton Primary Academy Holiday Club for the above sessions and will bring a packed lunch if staying between 12.30pm and 1.30pm.

Signed: \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name: \_\_\_\_\_ (Person with parental responsibility)