Davington Primary School Davington After School Club and Holiday Play Scheme

PLEASE COMPLETE THIS FORM IF YOU WISH YOUR CHILD TO ATTEND THE AFTER SCHOOL CLUB FROM SEPTEMBER.



INTEREST FORM 2024/2025

Personal Information

Child's Name:	Name: Date of Birth:								
Known as (if different from above):									
Name of Parents: Or Person with Legal Parental Responsibility (if appropriate):									
Child's Home Address and Postcode (or addresses if more than one):									
Main residence Adult at this address	Second residence (if appropriate) Adult at this address								
Home Phone Number: Email: Send letters here by email / post (delete) Language spoken at home:	Home Phone Number: Email: Send letters here by email/post (delete)								

School Information

School Attended:	School contact number:			
Classroom contacts name:				
Address:	Does/will your child attend a Breakfast Club: YES / NO			
Postcode:				

Days required

I wish my child to attend Davington After School club											
		Mon	Tues	Weds	Thurs	Fri	(please tick)				
		(
Someone will contact you with availability and a Registration form on the contact details provided.											
Holiday Club											
I wish my child to attend the Davington Holiday Playscheme.											
Someone will contact you with Registration form and Holiday club information on the contact details provided.											
Signed: .					Date:						