

Dane Royd Extended Provision

Monthly Request Form - School



Hours Required _____

Name of Child(ren) _____

Week commencing _____

Day	Monday	Tuesday	Wednesday	Thursday	Friday
7.30-8.45					
3.20-4.20					
4.20-5.20					
5.20-6.00					

Week commencing _____

Day	Monday	Tuesday	Wednesday	Thursday	Friday
7.30-8.45					
3.20-4.20					
4.20-5.20					
5.20-6.00					

Week commencing _____

Day	Monday	Tuesday	Wednesday	Thursday	Friday
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Week commencing _____

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3.20-4.20					
4.20-5.20					
5.20-6.00					

Ad Hoc Bookings

There can be no refund for the cancellation of ad hoc bookings. Change to the day/date of ad hoc bookings will be allowed only at the discretion of the manager and only prior to your child being admitted. There can be no refund for reduction in hours, but increased hours will result in an additional fee.

Signed _____ Date _____