

St. Gilbert's SAS Booking form

Payment in full is required with this booking (BACS preferred)

									CONTRACTOR OF THE PARTY OF THE
Name of child/children:								Ad hoc/Termly	Together
Please insert the nu	mber of ses	sions you require							Strw Seeds: Grow Togother: Reach High
Week Beginning	Breakfast Session	After School Stay and Play with snack Collection by 5pm	After School Full Session with snack Collection by 5.30pm	Daily Charges	Staff use only			Signature of Parent Carer	
Charge per session	£5.30	£7.40	£9.50	Total	Time in	Time out	Staff initials		
Monday									
Tuesday									
Wednesday									
Thursday									
Friday			Not Available						
Total									
		METHOD OF PAYM	ENT: Preferably by E	BACS to Acc	count No 0	0878606 S o	rt Code 30	98 02	
Government funded hours to be claimed for SAS sessions					Cash/Cheque			Receipt No	
Fees include brea	kfast/snac	ks			-				
TERMS: By making	a booking yo	u confirm agreement of th	ese terms. Payment with	n booking plea	ise.				
24 hours notice requi	red for cance	ellation of booking. Where	children are absent due	to holiday or	sickness thei	ir parents/car	ers will be e	expected to pay the full fee	
Please note if children	are not coll	ected on time late charges	will be added (£5 per ch	ild for every 5	minutes late	e)			
Jnless prior arrangen	nents have be	een made, if payment is no	t received after 14 days f	rom the 'Wee	ek Beginning'	date on your	invoice, an	additional 5% will be added	d to your invoice
Staff use only	Notes								
Payment received		Date Payment		Method of		Payment			
by	initials	received	00/00/20	payment		Reference		Amount received	