

SUMMER HOLIDAY CLUB 2018

Name of Child 1: _____ Form: _____

Name of Child 2: _____ Form: _____

Name of Child 3: _____ Form: _____

I would like the above named child/ren to attend Reigate St Mary's Holiday Club on the days selected below.
I have included payment of £40 per day per child made payable to Reigate Grammar School.

Total number of days _____ Total of amount payable £ _____

Signed _____ Date _____

Summer (Kindergarten to Year 6)
Wednesday 04th July - Fri 03rd August 2018

			Weds 04	Thurs 05	Fri 06
Child 1					
Child 2					
Child 3					
	Mon 09	Tues 10	Weds 11	Thurs 12	Fri 13
Child 1					
Child 2					
Child 3					
	Mon 16	Tues 17	Weds 18	Thurs 19	Fri 20
Child 1					
Child 2					
Child 3					
	Mon 23	Tues 24	Weds 25	Thurs 26	Fri 27
Child 1					
Child 2					
Child 3					
	Mon 30	Tues 31	Weds 01	Thurs 02	Fri 03
Child 1					
Child 2					
Child 3					

Please note no refunds will be given for illness or change in circumstance on the day. Places are not transferrable.

Please return form to ctl@reigatestmarys.org or School Reception.