



Coaley Church of England Academy

The Street, Coaley, Dursley, Gloucestershire, GL11 5EB
Executive Headteacher Mr Richard Lucas
t: 01453 890358 e: admin@coaley.gloucs.sch.uk
www.coaleyacademy.co.uk



AFTER SCHOOL CLUB - BOOKING FORM 2022/23

The After School Club operates every afternoon each week from **3.15pm – 4.30pm or 5.30pm** term time only, the cost per session is **£5.00 until 4.30pm, or £6.50 till 5.30pm, including an optional snack.**

Please Note:

- You will be charged £6.50 if your child is collected after 4.30pm**
- Final pick up is 5.30pm – a late penalty charge of £5.00 will be incurred for late collections**

Please specify a start date and indicate which days and sessions you require by ticking the boxes below:

Start date:

TIME	Monday	Tuesday	Wednesday	Thursday	Friday
3.15pm – 4.30pm					
3.15pm – 5.30pm					

Child's name

2nd Child's name

3rd Child's name

☐

Please tick this box if you require the above booking to continue from the start date until the end of the current academic year [adjustments to your booking can be made at the beginning of a term by completing a new booking form, if necessary – please give at least a week's notice]

- I understand that sessions must be paid in advance and no refunds will be given due to absence or cancellations.**
- I understand that regular bookings will be invoiced termly (6 times a year), and adhoc bookings monthly.**
- I understand that the preferred method of payment is bank transfer to 30-93-48 78786963 (please quote your account reference or surname).**
- I understand that session times will be 3.15pm – 4.30pm or 3.15pm – 5.30pm, and I also understand the different costs involved (as described above).**
- I understand my child will be given a snack, such as cheese & biscuits, crumpets, carrots/cucumber sticks etc, and a drink at 3.30pm.**
- Dietary requirements for individual children need to be discussed with Club staff, including allergies.**
- Should I arrive early I can collect my child(ren).**
- I agree to keep a child away from the club if s/he is sick or if advised to do so by a doctor and/or staff members (vomiting and diarrhoea must be clear for 24 hours).**
- I have read the After School Club Terms and conditions.**

Signed:

Name:

Date:

FOR OFFICE USE	
BOOKED	
INVOICED	SEE OVER
PAID	SEE OVER
BANKED	SEE OVER

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FOR OFFICE USE ONLY

INVOICES

TERM 1

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

TERM 2

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

TERM 3

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

TERM 4

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

TERM 5

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

TERM 6

DATE	AMOUNT	INVOICE NO	PAID	BACS/Cash	DATE PAID

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