## Extended School

## Waiting List Request



**Child’s Name** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Class \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Contact Telephone Number**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please tick the following boxes:

 You are going back to work or to study.

 If your child has special needs or a disability.

Please tick the box if your joint family income is lower than £24,000 to be eligible for application for a discounted rate.

Please tick boxes relevant to you:

I am interested in applying for a After School Club place at St. Josephs which runs from 3:15pm until 6:00pm at a cost of £12 per session. Sibling concession £10

Please tick required days

MON TUE WED THURS FRI

I am interested in applying for breakfast club place at St. Josephs from 7:30am at a cost of £5 per session. (latest drop off 8:15am)

Please tick required days

MON TUE WED THURS FRI

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_