

Date	Drop off time	Pick up time
Monday 29" October		
Tuesday 30th		
Wednesday 31 st		
Thursday 1" November		
Friday 2 rd November		

Parents Signature: _____Date: _____

ookings must be submitted with full payment, which will secure your child's place. Bacs payment fails: account number: 65916084 sort code: 09-01-28 please reference payments with your lids name.