

WOODLAND GRANGE PRIMARY SCHOOL

EASTER HALF-TERM CAMP

Monday 11th to Thursday 14th April

**PLEASE ONLY COMPLETE THIS FORM IF YOU ARE PAYING WITH
CHILDCARE VOUCHERS**

| | | | |
|----------------------------------|--|--------------|--|
| Child's Name | | Class | |
| Childcare Voucher Company | | | |

Please tick the sessions you require

| SESSION | COST | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | COST |
|------------------------------------|--------|--------|---------|-----------|----------|--------|------|
| 8am to 1pm | £13.75 | | | | | | |
| 1pm to 5pm | £11.00 | | | | | | |
| 8am to 5pm | £24.75 | | | | | | |
| Total amount in childcare vouchers | | | | | | | |

Signed: _____

Date: _____

Parent with parental responsibility

Please return this form to the school office email

office@woodlandgrange.leics.sch.uk

OFFICE USE ONLY

| | |
|--|--|
| Date Childcare Voucher Payment Received | |
| Total Received | |
| Signed | |