#### **Prestonpans After School Club**

Application Form

|  |  |
| --- | --- |
| Name of Child |  |
| Date of Birth |  |
| Parent/Carer(s) Name(s) |  |
| Address |  |
| Telephone Number (s) |  |

# Please indicate the days and times required

|  |  |  |
| --- | --- | --- |
|  | From | **To** |
| Monday |  |  |
| **Tuesday** |  |  |
| **Wednesday** |  |  |
| **Thursday** |  |  |
| **Friday** |  |  |