|  |  |
| --- | --- |
|  **Name of Student** | **Year** |
| **Please circle or tick each timed session required:** |

|  |
| --- |
| **JUNE**  |
| 7TH | 8TH | 9TH | 10TH | 11TH |
|  |  |  |  |  |
| 14TH | 15TH | 16TH | 17TH | 18TH |
|  |  |  |  |  |
| 21ST | 22ND | 23RD | 24TH | 25TH |
|  |  |  |  |  |
| 28TH | 29TH | 30TH |  |  |
|  |  |  |  |  |

|  |
| --- |
| **JULY** |
|  |  |  | 1ST | 2ND |
|  |  |  |  |  |
| 5TH | 6TH | 7TH | 8TH | 9TH |
|  |  |  |  |  |

You can hand in the booking forms into the office or email them back to: office@stjohnfisher-wigston.leics.sch.uk

**Payment has been made by the following (please tick):**

Parentpay ⬜ Childcare vouchers ⬜