



**Sessions and Hours Contract**

School Terms / Holiday Play scheme (delete as appropriate)

Setting: \_\_\_\_\_

I the Parent/Carer of: \_\_\_\_\_

wish to place my child/children in the care of Eye Spy Club  
for the sessions and hours stated below:

	Pre-school	Afternoon	After- school
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

I understand that the hours I have requested are fully payable whether my child / children attend or are absent from a session.

Care will always be provided over these contracted hours.

I agree to allow my child / children to be photographed for use solely at the Club.

If needed, appropriate fees will be charged for extra care payable on same day basis.

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_



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