



Mischievous Monkeys Holiday Club

We provide holiday club for children aged 4 years to 11 years from 8am—6pm

Monday to Friday.

Activities Include

Arts and Craft

Baking

Outdoor games and much more



BREAKFAST, LUNCH & SNACKS ARE PROVIDED

Children are welcome to bring their own games to play with the other children!

Limited places only!

First come first served

Booking forms are available at the school office and on the website

<http://meridenceprimaryschool.co.uk/mischievousmonkeys.html>

For more information email:
s77ebomm@meriden.solihull.sch.uk

HOLIDAY menu

February 19th to 23rd 2018

Monday

A selection of cheese, chicken and ham sandwiches with cucumber & dip/ fruit yogurt, fresh fruit/ milk, fruit juice and water

Tuesday

Pizza, smiley face potato, beans / selection of fresh fruit / milk, fruit juice and water

Wednesday

Jacket potato with cheese and spaghetti hoops / fresh fruit, cupcakes / milk, fruit juice and water

Thursday

Wraps with a selection of coloured peppers / fruit yogurt / raisins / milk, fruit juice and water

Friday

Pasta with sauce/ cheese / selection of fresh fruit / milk, fruit juice and water



Mischievous Monkeys



Child's Name _____ Class _____

Please place a tick in the box which corresponds with the days your child will be attending Mischievous Monkeys Holiday Club. Please make your payment via ParentPay 'Mischievous Monkeys' basket and note your receipt number on the booking form below. **(Any forms without a receipt number will be returned).** If you pay by childcare vouchers, please indicate.

Once you have signed and returned this form you will be notified of your child's place.

Time	8am—1pm £17	8am—3.30pm £22	8am—6pm £27
Monday 19-02-18			
Tuesday 20-02-18			
Wednesday 21-02-18			
Thursday 22-02-18			
Friday 23-02-18			

ParentPay receipt number _____ ****REQUIRED****

OR

Childcare Voucher **(please state voucher company used)** _____

Signed _____ Date _____

Print name _____

Email address _____ ****REQUIRED****

PLEASE PRINT IN BLOCK CAPITALS

Emergency contact details:

Name _____ Number _____

Relationship to the child _____

Please list below any allergies/ dietary needs your child may have:
