



The Badger Club
Long Furlong After School Club

REGULAR SESSIONS REQUEST FORM

Child's Full Name:

Child's Class/Year:

Day(s)/Regular session(s) required:

From (date):

Signature of Parent/Carer:

Date:

Please return this form to the Club Manager.

**PLEASE BE ADVISED THAT WE MAY NOT BE ABLE TO OFFER YOUR
PREFERRED DAYS, DUE TO AVAILABILITY; BUT WILL IN ALL
INSTANCES, TRY OUR BEST TO ACCOMMODATE YOUR REQUESTS.**