

Please cut off and return this slip to School Shuttle **Childcare Services to** make a booking

Packed lunch must be provided

Please tick the days you wish to attend	
MONDAY	X
TUESDAY	1877
WEDNESDAY	
THURSDAY	
FRIDAY	

Child Name	
Tel No	
Email	
TOTAL CARE COST	

Email:Admin@SchoolShuttle.co.uk Tel: 01204 416990





