

THE GALAXY CLUB.

SOUTHBOROUGH PRIMARY SCHOOL. Tel: 020 8467 2343

**Application Form.**

Childs name:

Year group:

Parent/Carer's name:

Contact N°:

Email:

Start date:

Please indicate which sessions you require your child to attend the club.

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Signed:

Date:

Please return the completed form to:

The Manager.  
Galaxy Club.  
Southborough Primary School,  
Southborough Lane.  
BR2 8AA

Date received:

\*Please be aware you may not be contacted until a place becomes available.