



Year Group	Day and Time (Please tick which session you would like to book)			Venue
Year 7	Friday	6pm-7pm	<input type="checkbox"/>	Stoneygate
Year 8	Friday	7.10pm-8.10pm	<input type="checkbox"/>	Stoneygate
Year 9	Thursday	7.10pm – 8.10pm	<input type="checkbox"/>	Stoneygate
Year 10	Monday	6.00pm- 7.10pm	<input type="checkbox"/>	Stoneygate
		6.00pm- 8.30pm	<input type="checkbox"/>	
	Tuesday	4.45pm-5.45pm	<input type="checkbox"/>	Belgrave Neighbourhood Center
Year 11	Sunday	9.00am-11.30am (Triple)	<input type="checkbox"/>	Stoneygate
		12.00pm-2.30pm (Double)	<input type="checkbox"/>	
	Tuesday	6.00pm-7.00pm	<input type="checkbox"/>	Belgrave Neighbourhood Center

Student Name	
Date of Birth	
Address	
Student e-mail address	
Student contact number	
Parent name	
Parent e-mail address	
Parent contact number	

Current working Grade: Biology Chemistry Physics.....

Does the student have any health issues, or allergies? If so, please state here:

Payment is required on a 4-weekly basis and reminders will be sent out. If your child fails to attend their allocated session, the work will be emailed for them to complete. Please note that it may not be possible for a missed session to be rearranged or rescheduled. Please tick if you are happy for photos/videos of your child to be taken for social media/website

Parent/Guardian Signature Date:

Bank: HSBC. **Name:** Miss R Kanani
Sort Code: 40-28-03 **Account number:** 91403052