

KS1 Milk Booking Form

Summer Term 1

Child's Name:

Class:					
Please	tick the weeks y	ou wish your cl	hild to have milk	ς:	
	Week Commencing 29th April at a cost of £1	Week Commencing 6 th May at a cost of £1	Week Commencing 13 th May at a cost of £1	Week Commencing 20 th May at a cost of £1	
	return this for c milk for your			dnesday 10 th A	pril if you would like
to the c	office the charg	e for this milk	will then show	in ParentPay.	this form is returned If the payment is not to book and provide
	sign below to co ne necessary pa			rstood the book	ing form and agree to
Signed:					
Print:					

