

**PLEASE FILL IN AND
RETAIN THIS PORTION AS
YOUR COPY**

Choose which days you would like to set aside for activities, including prep, then enter your choices for each of those days. If you do not have a second or third choice then leave them blank. Please tick whether the activity is:

L = lunch time, or A/S = after school.

Please retain this side for your reference.

**PLEASE FILL IN, THEN CUT OFF
THIS PORTION AND RETURN TO
MRS LEACH OR THE
SCHOOL OFFICE BY
FRIDAY 28th AUGUST**

Pupil's name

Pupil's form

Date returned

Monday	L	A/S	Monday	L	A/S
1 st Choice			1 st Choice		
2 nd Choice			2 nd Choice		
3 rd Choice			3 rd Choice		
Tuesday	L	A/S	Tuesday	L	A/S
1 st Choice			1 st Choice		
2 nd Choice			2 nd Choice		
3 rd Choice			3 rd Choice		
Wednesday	L	A/S	Wednesday	L	A/S
1 st Choice			1 st Choice		
2 nd Choice			2 nd Choice		
3 rd Choice			3 rd Choice		
Thursday	L	A/S	Thursday	L	A/S
1 st Choice			1 st Choice		
2 nd Choice			2 nd Choice		
3 rd Choice			3 rd Choice		
Friday	L	A/S	Friday	L	A/S
1 st Choice			1 st Choice		
2 nd Choice			2 nd Choice		
3 rd Choice			3 rd Choice		