

Lilypad Contract Cancelled/Amended form (please provide one month's notice)

Child's Name:		
Date of Birth:		
Sessions to be cancelled/amended (please mark either C, or A):		

 Day
 Breakfast Club
 Lunch Club (Nursery Only)
 After School Club

 Monday
 Tuesday

 Wednesday
 Thursday

 Friday

Effective	from	(date):

I agree that all sessions up to and including the above date will be paid for in		
full in order for cancellation to be accepted.		
Name:		
Signed:		