



Heyhouses Before and After School Club

Parental Feedback Form

Name of child:

1. What sessions does your child/children attend:

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

2. Does your child/children enjoy coming to their sessions?

Yes / No

If no please state why:

3. Do you feel that there are enough activities for your child/children?

Yes / No

If no please state what activities you would like us to introduce

4. Do you feel that we offer food that your child/children likes

Yes/ No

5. How do you find the communication between staff and pupils

Average

good

excellent

6. How do you find communication between staff and parents

Average

good

excellent

7. How do you find the administration of the Before and After School Club

Average

good

excellent

Please feel free below to add any comments you wish to help us ensure that we are providing the best possible care for your children.