Leybourne Ss Peter and Paul C.E. Primary School

Breakfast Club Registration Form

Please fully complete both sides of this form.

Full Name of Child	Full Name of Child	Full Name of Child
Date of Birth	Date of Birth	Date of Birth
Class	Class	Class
	Home Address	
	E mail Address	
Medical Information and Allergies	Medical Information and Allergies	Medical Information and Allergies
Food Intolerances	Food Intolerances	Food Intolerances

Requested days for breakfast club: (please tick)

Monday	Tuesday	Wednesday	Thursday	Friday

OR

Please specify dates that you would like if you do not need a regular booking:

Additional Useful Information	

Do you consent to the following?1. Photographs being taken for our records and display boards?Yes/No2. Qualified staff administering emergency first aid?Yes/No3. Staff applying sun cream as required?Yes/No4. Your child/children participating in face painting activities?Yes/No

Demon with menutations i	
Person with parental responsi	bility/ main carer
Title	
First name	
Surname	
Relationship to child	
Phone number : Home	
Mobile	
Work	
Second Contact	
Title	
First name	
Surname	
Relationship to child	
Phone number : Home	
Mobile	
Work	
Trusted Friend/Family Memb	er
Title	
First name	
Surname	
Relationship to child	
Phone number : Home	
Mobile	
Work	
Trusted Friend/Family Memb	er
Title	
First name	
Surname	
Relationship to child	
Phone number : Home	
Mobile	
Work	
WOIK	

All sessions booked will be charged for unless your child is unwell. Should you wish to amend or cancel your booked sessions, please advise us in notice, giving notice of 5 days.

Parent / Carer Signature

Date

Leybourne Ss Peter and Paul C.E. Primary School

Breakfast Club Parent Agreement

The Breakfast Club opens at 7.30am; children cannot be accepted before this time.

All sessions that are requested on your registration form will be charged for. We require written notice of one week (five days) if you would like to make any changes or amendments to your booked sessions.

Breakfast will be provided. Please use the registration form to notify us of any specific dietary requirements your child may have.

It is important that we are notified if your child is going to be absent. Please contact the Breakfast Club by calling 07850 765107 between 7am and 7.30am.

Fees must be paid for all booked sessions on the first day of the week, month or half term that your child attends. The only exception to full fees being payable is for sickness (when no charges will be made) or authorised holiday (when half fees will be payable to reserve a regular place).

We expect parents to co-operate with us by not sending their child to the Breakfast Club if they are unwell. If a child has vomiting or diarrhoea they need to be kept at home until 48 hours have passed since their last bout of illness. (This is in line with standard school policy). Staff will also be asked not to attend under the same circumstances.

If you wish you remove your child from the club, we will require notice of one week, to be given in writing.

We reserve the right to remove a child from the Breakfast Club for any breach of agreement or for inappropriate behaviour.

Signature of Parent / Carer

Name of Parent / Carer

Date

Please sign, date and return one copy of this form to us with your completed registration form.