



Breakfast Club Registration Form

Child's Details

Name	Current year group	Date of Birth
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I wish to register my child for Breakfast Club

Parent/Carer Details

Name	Name
<u>Home Address</u>	<u>Home Address</u>
Telephone:	Telephone:
<u>Work Address</u>	<u>Work Address</u>
Telephone:	Telephone:
Mobile Number:	Mobile Number
Email Address	Email Address

Alternative Emergency Contact Details (please provide details of at least one other person we can phone if we are not able to contact you)

Name	Relationship to Child	Mobile Number
Address		Other Telephone Number:
Name	Relationship to Child	Mobile Number
Address		Other Telephone Number:

Details of Child's Doctor

Name of Doctor	
Address of Surgery	Telephone Number

About Your Child

Please detail any additional/special needs:
Please detail any medical needs including details of any medication:
Please detail any allergies:
Please detail any dietary requirements:
Any additional information:

Please return this form to Mrs Corbett in the School Office

Terms and Conditions

- I understand that staff cannot be held responsible for any lost or stolen items.
- I understand that should there be any incidents at Breakfast Club involving my child, I will be informed of the situation.
- I confirm that the information given on this form is correct and agree to notify the club of any changes in detail.
- Places are allocated on a first come, first served basis and the club can accept a maximum of 30 children per session.
- Children attending the club must be handed over to Breakfast Club staff, and be signed in, by a responsible adult, no earlier than 7.35am each day at the Breakfast Club entrance. At 8:30am children will be brought into school.
- I understand that my child will be provided with a breakfast whilst at the club unless otherwise requested.
- I will pay promptly for sessions, one week in advance. Payment will be made at the school office, or will be sent in an envelope with my child's name clearly stating 'Breakfast Club' and the sessions payment is for.
- I have read and, in signing this form, accept the above conditions for my child attending the Breakfast Club.

Signature of Parent/Carer.....Date.....

Please print name.....