



Please complete both
sides



BREAKFAST CLUB

7.45 - 8.30 a.m.

Breakfast served until 8.30 a.m.

ENROLMENT FORM

I would like to enrol my child:

Name: _____ Class: _____

(if you have more than one child, please complete a form for each)

My child would like to attend on the following
days (please tick)

Monday _____

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Please note: this is to give us an idea of required staffing levels for the club. It does not commit your children to attending on those days, or prevent them attending on other days should you wish.

This would be on a (please tick)

Regular basis _____

Occasional basis _____

I understand that the daily cost is currently £2.00 for supervised play only, and £3.00 for supervised play and breakfast. Payment is to be received

ON THE DAY OF ATTENDANCE.



My child has the following allergies/medical condition:
(if none, please state 'none')

Emergency contact number (7.45 – 8.30 am) _____

Name of contact _____

Relationship to child _____

Parent's name (please print) _____

Signature: _____

Date _____