

Beavers Breakfast Club Registration Form

CHILD'S NAME:		SEX: M/F				
DATE OF BIRTH:		AGE:				
NAME OF TEACHER:		CLASS:				
NAME OF PARENT/CARER:	1					
HOME ADDRESS:						
TELEPHONE NUMBER:						
Please circle the day(s) you need						
Mon Tues Wed	Thur	S	Fri			
(BETWEEN 8.00 – 8.45 AM) Cost - £4.00 per day (£20.00 per week) – <u>2 week advance payment is required.</u>						
NAME OF DOCTOR:	ADDRESS:					
TELEPHONE NUMBER:						
ANY KNOWN MEDICALCONDITIONS/ALLERGIES, ETC.						
IS THERE ANY INFORMATION YOU FEEL WE SHOULD KNOW ABOUT YOUR CHILD(REN)?						
 I hereby give consent to any emergency medical treatment necessary during the course of each session. I will escort my child to the school 						
The above information is true to my knowledge						
Signed Da	te					

YOUR RESPONSIBILITY TO US

I/We, the parents/carers of	
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Wish to apply to use the facilities of the above breakfast club and agree to the following terms and conditions: I/We:

- That it is my/our responsibility to ensure that Kym, the Play Leader is informed of any change of circumstances and/or problems which occur so that they can be dealt with.
- To pay punctually on the first day of the week, the current fee per session, and understand that this money is **not refundable even if my/our child does not attend**.
- To agree to give one full week's notice should I/we wish to withdraw my/our child from the breakfast club.
- To keep the child away from breakfast club if advised to do so by a doctor or by the Play Leader, and to inform the breakfast club IMMEDIATELY if my/our child is absent due to a contagious disease.
- That it is my/our responsibility to ensure that my/our child understands that, whilst
 the breakfast club is more flexible than school, bad behaviour or behaviour that is
 either harmful to himself/herself/themselves, other children, or equipment will not
 be acceptable (it is important that you are aware the breakfast club upholds a
 current behaviour management policy which is readily available for reading. Please
 ask the breakfast club Play Leader if you wish to read this document).

Signed:	 	
Date:	 	

Should you have any queries or problems, please do not hesitate to contact us, we may be able to help.

The breakfast club reserves the right to withdraw the place of any child at its discretion.

PLEASE SIGN BOTH COPIES. RETURN ONE COPY TO THE BREAKFAST CLUB AND KEEP THE OTHER FOR YOUR OWN REFERENCE.

BREAKFAST CLUB

CONDITIONS OF MEMBERSHIP

OUR RESPONSIBILITY TO YOU

The Breakfast Club is here for you and your child's benefit. We hope you find it of use and that your child enjoys coming.

OPENING HOURS: 8.00am – 8.45am

COST: £4.00 per child, per session (subject to review)

- We aim to provide your child with a healthy start to the day in a stimulating, caring environment.
- The Breakfast Club will abide by the London Borough of Hounslow's Equal Opportunity Policy and no child will receive less favourable treatment than another on any grounds.
- An authorised adult must sign all children into the Breakfast Club.