**Registration for Breakfast Club at Viridis Schools**

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| **OFFICE USE ONLY** |  |
| START DATE: | SCHOOL SITE: |
| CLASS: | YEAR GROUP: |
| **PERSONAL DETAILS** |  |
| CHILD’S FULL NAME:PREFERRED NAME: | DATE OF BIRTH:BOY [ ] GIRL [ ] |
| FULL ADDRESS:POST CODE: |
| Siblings in school: YES [ ] NO [ ] Name of sibling(s): |
| Home telephone: | Mobile: |
| Names of Parents/Carers with whom the child lives: |
| **Where can we contact you during morning?** |
| 1st Main Carer: | 2nd Main Carer: |
| NAME: | NAME: |
| ADDRESS: | ADDRESS: |
| TELEPHONE: | TELEPHONE: |
| RELATIONSHIP TO CHILD: | RELATIONSHIP TO CHILD: |
| **List below the people allowed/authorised to bring/collect your child to/from school** |
| Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Tel No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel No:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**BREAKFAST CLUB TIMES**

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| Monday to Friday | Start 7.45am | Finish 8.55am |
| FSM Daily Cost- **£1.00**Non FSM Daily Cost- **£1.50** | FSM Weekly Cost- **£5.00**Non FSM Weekly Cost- **£7.50** | **Payment in advance only** |

**DECLARATION BY PARENT/CARER**

I agree:-

* I declare that all information given above is correct and agree to all authorisations given in the Confidential Form
* I will notify the school of any changes to the information provided above immediately if there is a change
* I understand that my child’s place may be withdrawn if I do not follow agreed procedures
* I understand that my child will not be able to attend unless I pay in advance for the provision.

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| **Parent/Carer** |
| Name:  | Signature: | Date: / / |