**BREAKFAST AND AFTER SCHOOL CLUB BOOKING FORM & CONTRACT 2024-2025**

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| Child/s Name/s: | Class/es: |
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Single Child /Siblings (delete as appropriate)Primary Contact phone number :Emergency contact phone number(Please provide an alternative to the above):Tick days as appropriate below |
|  | Mon | Tue | Wed | Thurs | Friday |
| All children – Breakfast -£7 per child |  |  |  |  |  |
| Breakfast club combined rate - £5 per child |  |  |  |  |  |
|  |  |  |  |  |  |
| Single child After School Club - £15 per child (£20 BC & ASC combined) |  |  |  |  |  |
| Sibling After School Club -£13 per child |  |  |  |  |  |
|  |  |  |  |  |  |
| Application for discount (salary under £24,000) |  |  |  |  |  |
|  |  |  |  |  |  |
| Payment terms: In advance with one month’s notice of cancellation. Payment must be made via Parent Pay, childcare vouchers or by bank transfer with the following details: AC: 33246485 Sort code: 200000  |
|  |  |  |  |  |  |  |
| I will be paying with childcare vouchers: Yes No  |
| Name of childcare voucher provider: |
|  |
| I understand that failure to pay in advance will result in loss of my childcare place and I agree to the terms of this contract. |
| All children to be collected by 5.55pm. £1.00 per minute late fee applied after 6.00pm |
| Signed Parent/Carer: Date:  |
|  Signed by Extended School Manager: | **Date:** |