

w/c 02/11

Mon

w/c 09/11

## CHESSWOOD JUNIOR SCHOOL Breakfast Club Booking Form Autumn (2) Half Term



w/c 14/12

Please complete the table below indicating with an **X** which sessions you would like to book.

w/c 16/11

w/c 23/11

w/c 30/11

w/c 07/12

Tues										
Wed										
Thurs										
Fri										
Number of sessions requested: Our Breakfast Club runs from 7.30am – 8.30am										
Shaded area indicates that school is closed for INSET or Bank Holiday										
Child details										
Child's Name: Class:										
Name:			Emerg	gency C		ct details dress:				
ivaille.					Auc	11622.				
Telephone number:					Relationship to child:					
Payment Information - £4.00 per session										
Payments must accompany the booking. An					Fees may be paid either by cash or cheque.					
additional fee of £1 per session will be charged for late payment.						Cheques payable to Chesswood Junior School please.				
Booking Information										
I would like to confirm and book the above sessions and enclose payment of £										
Please n	ote we cannot	refund navme	ante without one	week's n	notice :	of cancellation	lf your child is u	inable to attend	a hooked	
Please note we cannot refund payments without one week's notice of cancellation. If your child is unable to attend a booked space, please contact the school on 01903 204141 to confirm absence.										

Medical Information							
Please state any medical conditions your child has, i.e.; Allergies, Asthma, Diabetes							
Allergies:	Medical Conditions:						
Prescribed Emergency Medication:							
Should my child need to take medication for a life threatening condition - I authorise / do not authorise* the staff to administer this medication as prescribed and on my written instruction only.							
I give consent for the staff to administer first aid to my child.	Signed						
	Dated						
*Please delete as appropriate							