

# John Moore Primary School Breakfast and After School Club

## Registration Form

### Child's Details

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Tel No \_\_\_\_\_

### Parent/Guardian details

Name \_\_\_\_\_ Name \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

\_\_\_\_\_

Tel home \_\_\_\_\_ Tel home \_\_\_\_\_

Tel work \_\_\_\_\_ Tel work \_\_\_\_\_

Mobile \_\_\_\_\_ Mobile \_\_\_\_\_

Email Address (for invoices and information)

Known allergies or problems: \_\_\_\_\_

\_\_\_\_\_

I am aware that the setting will provide my child with foods prepared on site, as well as occasional celebration foods e.g. cakes, fruit, occasional sweets, and chocolate

Comments: \_\_\_\_\_

Signature: \_\_\_\_\_

Does your child have any special dietary needs or preferences? Yes/No (delete)

If yes, please give details:

----------------------

**Emergency Contact (if parents are not available)**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Relationship to child \_\_\_\_\_ Relationship to child \_\_\_\_\_  
Tel: \_\_\_\_\_ Tel: \_\_\_\_\_

**Person/s (other than parents) authorised to collect child (must be aged 16 or older).  
Children will only be allowed to leave with an authorised person.**

Name \_\_\_\_\_ Name \_\_\_\_\_  
Address \_\_\_\_\_ Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Relationship to child \_\_\_\_\_ Relationship to child \_\_\_\_\_  
Password \_\_\_\_\_ Password \_\_\_\_\_

Does your child have any special needs or disabilities? Yes/No (delete)

Details \_\_\_\_\_

Are any of the following in place for the child:

My Profile	Yes/No (delete)
My Plan	Yes/No (delete)
My Plan +	Yes/No (delete)
Educational Health & Care Plan	Yes/No (delete)

If you have answered yes to any of the above, what special support will he/she require in our setting?

\_\_\_\_\_

Signed (Parent/Guardian) \_\_\_\_\_

Date \_\_\_\_\_

Registration Form Agreed by \_\_\_\_\_  
(signed by authorised person on behalf of Breakfast & OOSC)

Date \_\_\_\_\_

# After School Club Regular Booking Form

Please tick the days you require in the boxes below, showing your regular pattern. Please ring Little Foxes, contact Bronwen or Kaylie on Family or email at [admin@littlefoxesplaygroup](mailto:admin@littlefoxesplaygroup). If you need to change a regular booking we need a months notice.

Regular Bookings	Child's Name												Class											
	Week 1				Week 2				Week 3				Week 4											
	M	T	W	T	F	T	W	T	M	T	W	T	F	T	W	T	M	T	W	T	F			
<b>ALL DAY</b> 7.45am - 5.30pm £17.00 per session																								
<b>BREAKFAST</b> 7.45am - 8.30am (inc Breakfast) £4.50 per session																								
<b>AFTER SCHOOL 4.30PM</b> 3.00pm - 4.30pm (inc snack and drink) £8 per session																								
<b>AFTER SCHOOL 5:30PM</b> 3.00pm - 5.30pm (inc snack and drink) £12.50 per session																								

Any dietary requirements or allergies \* .....

## TERMS & CONDITIONS

The terms and conditions, including fees for late collection, can be found on our website. Paper copies are available from the school office. By signing the below you confirm that you have read and accept our wrap terms and conditions. The amount due will be invoiced via Family on a monthly basis in advance. No allowances can be made for absences and sessions cannot be refunded.

Signed by Parent/ Guardian .....

Date .....