

St Michael's Early Birds Breakfast Club Application Form

Breakfast Club runs daily during term time from 7.45am to 8.30am. The fee for a child to attend is 50p per session. This must be paid on the day or in advance.

Child's Details			
Child's Full Name			
Child's Date of Birth		Age	
Class & Teachers Name			

Please tick the days you would like your child to attend Breakfast Club:

Monday	Tuesday	Wednesday	Thursday	Friday

Parent/Carer Contact Information	
Home Address	
Parent/ Carer's Name	
Relationship to child	
Contact Number	

Emergency Contact Details – In case of an emergency we will contact the parent/carers above. If unavailable, please list two further contacts that you would be happy to act on your behalf.			
1st Emergency Contact	Name:	Tel:	Relationship to child :
2nd Emergency Contact	Name:	Tel:	

Food Allergies	
Does your child have any food allergies?	

<p>Does your child have any specific dietary needs/ food intolerances or allergies that we should be aware of?</p> <p>Do you observe any cultural or religious procedures that you feel we should be aware of?</p>	
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Permissions (please tick)				
	Yes		No	
I give permission for photographs to be taken of my child enjoying their time at breakfast club. <i>They may be used in wall displays.</i>				
I give permission for photographs to be taken of my child enjoying their time at breakfast club. <i>They may be used on the school Breakfast Club web page and school website</i>				
No names will be put alongside photos				

By signing this form you confirm that you have read, understood and agree to the terms outlined in this application form and to the School's Breakfast Club policy

Signed Parent/Carer:	
Date:	

Version One: 7th Sept 2020