

Positivity. Integrity. Respect. Resilience. Aspiration.



FOLLY HILL BREAKFAST and AFTER SCHOOL CLUB

REGISTRATION FORM

If you would like to reserve a place at Breakfast Club or After School Club please complete the form below and return to the school office. Please note this does not guarantee you a place.

Breakfast Club Y/N (please circle)

If yes please indicate which days

Monday ☐

Tuesday ☐

Wednesday ☐

Thursday ☐

Friday ☐

After school Club Y/N (please circle)

If yes please indicate which days and which session

Monday ☐ Full Session or ☐ Half Session

Tuesday ☐ ☐

Wednesday ☐ ☐

Thursday ☐ ☐

I have read the Welcome Pack and agree to abide by the conditions detailed.

I understand that payment must be received by the School Office in advance and that my child will not be able to attend the Breakfast or After School Club until such payment has been received.

My child suffers from the following medical conditions / allergies :

Emergency Contact Telephone Number : _____

Child's Name : _____

Signed : _____

(parent / guardian)

Date : _____

Please complete and sign this form and return it to the School Office