



Godinton Primary School – Breakfast Club Enrolment Form

Please fully complete a separate enrolment form for each child and either hand it in at the school office or directly to the Breakfast Club Staff.

Child's Full Name		Date of Birth:		
Address:		Post Code:		
Name of Parent/Carer:				
Contact Numbers: Please underline the number, which you are most likely to be on during the Club hours				
Home:	Work:	Mobile:		
Please tick the days you will be requiring a place to be held for your child				
Monday	Tuesday	Wednesday	Thursday	Friday
Are these dates (1) Regular (2) Occasional				
Please give any details:				
How to Pay				
Payment can be made by Parentmail or by Voucher (Please check that we are registered with the company that your employer uses).				
Payment may be made on the day of attendance. However, payment in advance is required to reserve a place for a child over an extended period of time.				
Medical & Emergency Details				
Does this child have any medical condition of which we should be aware?				
Does this child have any allergies of which we should be aware?				
Does this child have any special dietary requirements of which we should be aware?				

Doctors Name:		Telephone No.	
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I give permission for emergency medical treatment to be given as required.

Signed.....

Relationship to child.....Date.....

Arrangements for Delivering the Child to the Breakfast Club

Please tick as appropriate:

- My child will be delivered to the club:
- My child will make their own way to the club:

Please list those adults who may drop your child off:

If your child is ill and will not be attending please contact the club to let them know.
 If a child does not arrive at the club when they are booked to attend, we will contact you on the numbers you have given. Please list a second emergency contact for us to call should we be unable to contact you.

Additional emergency contact:

Name:		Contact Number	

I give consent for this information to be recorded on the School's information System.(Emergency contact to sign please). Signed:	Yes	No
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I, the Parent /Carer* undertake to ensure that Godinton Breakfast Club are notified immediately in writing of any change to the details given on this form.

Signature of Parent/Carer*	Date:
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