

Breakfast and After School Club Registration Form

Please complete and return this form to the School Office or email a copy to:
info@stcharlesb.surrey.sch.uk

Child's Details

| | |
|---------------|--|
| Child's Name | |
| Date of Birth | |
| Address | |
| School Year | |

Family / Home

| | |
|-------------------------------------|--|
| Contact 1 - Name | |
| Relationship to child | |
| Address (if different from child's) | |
| Mobile Telephone Number | |
| Contact 1 - email address | |

| | |
|-------------------------------------|--|
| Contact 2 - Name | |
| Relationship to child | |
| Address (if different from child's) | |
| Mobile Telephone Number | |
| Contact 2 - email address | |

St Charles Borromeo Catholic Primary School and Nursery

Diocese of Arundel and Brighton

 www.stcharlesb.surrey.sch.uk
 01932 842617
  info@stcharlesb.surrey.sch.uk
 Portmore Way, Weybridge, Surrey, KT13 8JD

Head of School Miss Gemma Willcox

Additional Contact Information

Please list below the names of all **additional** persons authorised to collect your child (After-School Club only). These should **not** be the names of parents.

| Name | Relationship to Child | Main Contact Number |
|------|-----------------------|---------------------|
| | | |
| | | |
| | | |

For security reasons, please provide a password. Authorised adults will be required to give the correct password before they will be allowed to collect your child. **Please do not share this password with your child.**

Password:

Medical Information

Please advise us of **any** medical conditions and dietary requirements relating to your child (*please continue overleaf if needed*).

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St. Charles Borromeo
CATHOLIC PRIMARY SCHOOL
AND NURSERY

Additional Information

Please feel free to provide any additional information that will help us support your child or any information that staff need to be aware of.

Fees

| | |
|----------------------------|--------------------|
| Breakfast Club from 7:45am | £6.50 per session |
| Breakfast Club from 7:30am | £8.00 per session |
| After-School Club | £15.50 per session |

| | |
|---|---------------------------------|
| I will be using Childcare Vouchers for all or part payments | YES / NO <i>(please circle)</i> |
| Name of Childcare Voucher Provider | |
| I will be using Tax free childcare | |

I hereby give permission for my child to attend St Charles Borromeo Breakfast Club and/or After-School Club. In the event of an accident, I give permission for a trained member of staff to administer first aid or to seek emergency treatment on my behalf.

Please refer to the Breakfast and After-School Care Policy found on the school website for full Terms and Conditions, plus details of cancellation policies and payment terms.

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CATHOLIC PRIMARY SCHOOL
AND NURSERY

I confirm that I have read and understood the policy.

Parent/Carer:

Signed:

Name:

Date:

On behalf of St Charles Borromeo Catholic Primary School:

Signed:

Name:

Date:

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