



REGISTRATION FORM FOR EARLY BIRDS BREAKFAST CLUB

MONDAY – FRIDAY, 7.45-8.30 a.m.

Name of Child(ren) _____

I wish my child(ren) to attend Early Birds Breakfast Club on the following days of the week:

<input type="checkbox"/>	Mondays
<input type="checkbox"/>	Tuesdays
<input type="checkbox"/>	Wednesdays
<input type="checkbox"/>	Thursdays
<input type="checkbox"/>	Fridays

Please tick the session(s) your child(ren) would like to attend; starting week commencing _____ . (Ad hoc sessions are also available with prior notice, please contact the school.)

The cost is **£4.50** for the first child and **£4.00** for any siblings and includes a breakfast consisting of cereal, toast and a drink.

Early Birds Club will use the emergency contact details held by the school unless informed otherwise.

Please give details of any allergies/food intolerance and medical conditions.

Signed _____ Date _____
(Parent/Guardian)