

Breakfast Club Booking Form

Term 2 2020

We aim to provide a high quality Breakfast Club experience for your child. In order to be able to staff/resource this appropriately, we need to be able to plan for each term in advance.

Please complete the booking form below indicating which sessions you require by placing a tick in the box and adding the total amount in the end column. Your completed form must be returned to Breakfast Club (via the school office) to enable processing. Please note a place at Breakfast Club is not guaranteed as some days may be full.

As stated in your Breakfast Club contract all fees must be paid in advance at a cost of £4.00 per session, per child (Siblings £3.00/ session). Your child's place will not be secured until we have received your completed booking form along with full payment. If you use a workplace voucher to pay for your child's place please also complete section B.

Thankyou

Section A

Name of child _____ **D.O.B** ____/____/____ **Class** _____

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|------|-----|-----|-----|-----|-----|----------------|
| 24/2 | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|-----|-----|-----|-----|-----|-----|----------------|
| 2/3 | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|-----|-----|-----|-----|-----|-----|----------------|
| 9/3 | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|------|-----|-----|-----|-----|-----|----------------|
| 16/3 | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|------|-----|-----|-----|-----|-----|----------------|
| 23/3 | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|------|-----|-----|-----|-----|-----|----------------|
| 30/3 | | | | HOL | HOL | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|-----|-----|-----|-----|-----|-----|----------------|
| | | | | | | |

| W/C | Mon | Tue | Wed | Thu | Fri | Weekly Total £ |
|-----|-----|-----|-----|-----|-----|----------------|
| | | | | | | |

Please indicate your chosen method of payment along with the amount and date paid below.

| Cash | Cheque | Parent Pay | Vouchers | Pupil Premium |
|-------------|---------------|-------------------|-----------------|----------------------|
| Amount | Amount | Amount | Amount | |
| Date | Date | Date | Date | |

Section B

Work place Vouchers

| Name of provider | Account in name of/number | Expected date of transfer. | Amount |
|-------------------------|----------------------------------|-----------------------------------|---------------|
| | | | |

Breakfast Club Contact Details

Email: breakfast@brunswick-house.kent.sch.uk

Mobile Telephone: 07856 957598 (Available between 7.30am-8.45am Mon-Fri, please leave voicemail if no response during these hours)

Administration

| | Date received | Signed |
|-------------------------------|----------------------|---------------|
| Booking Form Completed | | |
| Payment received | | |

| | |
|-----------------------------------|--|
| Agreement to commence from | |
| Attendance | |