



## BREAKFAST CLUB – REGISTRATION FORM

<b>Child's Full Name:</b>		<b>Year Group:</b>	
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I would like my child to attend Field View's Breakfast Club, I agree to book my sessions online via ParentPay and pay **£2.50** per day, in advance. I would like to book sessions on the following days:

<b>Monday</b>		<b>Tuesday</b>		<b>Wednesday</b>		<b>Thursday</b>		<b>Friday</b>	
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Once your place has been confirmed you will receive an email with your ParentPay login details and instructions on how to book your sessions.

<b>Parent/Carer Details:</b>	
<b>NAME(S):</b>	
<b>TELEPHONE NUMBER(S):</b> to be used in emergency during Breakfast Club time only (7.45 to 8.45 am)	
<b>EMAIL ADDRESS:</b>	

## MEDICAL INFORMATION / SPECIAL REQUIREMENTS

	<b>YES</b>	<b>NO</b>	<b>If YES please give details</b>
Does your child have any know illnesses/allergies/conditions?			
Does your child have any special dietary requirements?			
Is your child on any regular medication?			
Does your child have any particular or special needs?			
Please provide any other relevant information:			

**Signed:** ..... **Date:** .....