



NELSON PRIMARY SCHOOL
BREAKFAST CLUB APPLICATION FORM

Nelson Primary School
Nelson Road
Whitton
Middlesex
TW2 7BU

Child's Surname: Child's Forenames:

Date of Birth:

Current class:

Days you would like your child to attend the Breakfast Club (Please tick)

Monday	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>
Thursday	<input type="checkbox"/>
Friday	<input type="checkbox"/>

Date when you would like your child to start at the Breakfast Club:

Please note below any allergies that your child has:

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Nelson Breakfast Club Terms and Conditions

Please read the terms and conditions below, and sign to indicate your acceptance of these.

- I understand that as the parent/carer I am responsible for registering my child daily by taking them to the duty adult in the gym to register attendance (with the exception of Year 6 pupils who may walk independently)
- I understand that I need to pay termly in advance, via ParentPay, to enable my child to attend breakfast sessions and that these fees are non-refundable
- I understand that the school may withdraw the place if payment is not received on time
- I understand that I need to give half a term's notice, in writing, if I no longer require a place, otherwise I will be subject to a £30.00 fee
- I understand that my child will uphold the behaviour code of conduct in line with the school's policy. Failure to do so could result in your child's loss of place.
- I understand if my child arrives at 8.20am or after then breakfast will not be available

Name of parent/carer: _____

Signed by parent/carer: _____ Date: _____

FOR OFFICE USE: Place offered to start: