

Parent Contract

Charges

Fees are payable weekly (daily bookings will be taken upon availability). Our fee structure is as follows:

£4.00 for the first hour £1 for every extra $\frac{1}{4}$ hour

Fees for siblings are available on the website

Arrival and Collection

I understand that my child will be collected from school at 3.15pm and escorted to the club and will remain at the club until collected by a named adult as detailed overleaf.

In the event of illness/emergency, I consent for any of the named contacts on this agreement to be contacted to collect my child.

Should the named adult be late for collection then I understand that I will be charged at the above rate. No child should be picked up any later than $5.10 \, \text{pm}$. Persistent lateness after $5.10 \, \text{pm}$ will result in a fine of £5.

Emergency Aid

I consent to any emergency medical treatment necessary during the running of the club. I authorise the play/care staff to sign any written form of consent required by the hospital authority if the delay in getting my signature is considered by the doctor to endanger my child's health and safety.

If I require my child to be given medication by staff at the club, I will provide the play leader with detailed instructions in writing, along with the clearly labelled medication. I will also sign and date these written instructions.

I have read and understood the above contract. The information I have given is correct to the best of my knowledge. Should there be any changes to the information given in this document, then I will notify the Supervisor immediately in writing. I agree to abide by the terms and conditions of this agreement.

Signed:	
Date:	

Eyton Extras

Registered Charity 1187748

Registration Form

Child' Name (in full)			
Preferred Name			
Address			
Date of Birth		Gender	···
School Attended			
Name of Parent/Guardian			
Telephone Home:	Work	Mobile	
Religious Belief/First Langue	ıge		
(this is purely to avoid any p	ossible offence)		
allowed to leave with their na of any changes to this.	med contacts. The c	illness/accident. Children will only be lub leaders must be advised beforehand	
Name:			
Relationship to Child:			•••
Address:			
Telephone Home:	Work	Mobile	
Name of Child's Doctor:			
Address:			
Details of Allergies, Diet, M	edication or Medical	Issues or any special needs:	
Dates of Immunications:			

A copy of this contract is available on the school website <u>www.eytonprimary.co.uk</u>