

Childs Name:	DOB:	Known as :.....
School attended:..... Address: Parent 1 name..... Parent 1 Telephone:..... Parent 2 name..... Parent 2 Telephone:.....	Emergency Contacts: Name:..... Mobile 1: Name:..... Mobile 2:	
Has your child got any allergies? If yes, what are they? Are there any specific health needs for your child? If yes, what are they?	Does your child take any regular medication? If yes, what is it and how often do they require it.	
Your child's first language:	Language(s) used at home:	
Who will collect your child? (No-one under 16 years of age)	Please tell us a password to be disclosed to staff when collecting your child:	
Is your child confident in using the toilet independently?	Does your child sleep during the day?	
What are your child's interests? (e.g painting, dancing, sports etc)	Anything else you would like to tell us?	

Please circle - Do you give consent for your child:

To have photos taken to be used in holiday provision newsletters and marketing **Yes / No**

To be taken offsite for trips in the local area (eg. Walk to the shops) **Yes / No**

To be transported by minibus to another site (Children accessing wrap around care on another site) **Yes / No**

Please tick sessions required

Provision- December Half Term	Times	Cost per day	Monday 20/12	Tuesday 21/12	Wednesday 22/12	Thursday 23/12	Friday 24/12
Location: St Margaret's Nursery Ages 3-7	8.00am-8:30am	£3.50					
	8.30am-3.30pm	£49					N/A
	8.30am-11.30am	£21					
	12:30pm-3.30pm	£21					N/A
	8.00am-6pm	£70.00					N/A
	3:30pm-4:30pm	£7					N/A
	3:30pm-5pm	£10.50					N/A
Location: St Margaret's Nursery Age 2	8.00am-8:30am	£3.75					
	8.30am-3.30pm	£52.50					N/A
	8.30am-11.30am	£22.50					
	11:30am-12:30pm	£7.50					N/A
	12:30pm-3.30pm	£22.50					N/A
	8.00am-5.00pm	£67.50					N/A
	3:30pm-6pm	£11.25					N/A

*Children will need to bring a packed lunch with them each day if staying over lunch. Please ensure there are no fizzy drinks, glass bottles, sweets, nuts or chocolate. Children accessing breakfast and tea club will be provided with meals at these times but will still need to bring a packed lunch.

Terms and conditions

- If you are late collecting your child, there is a charge of **£1.00 for each minute that you are late.**
- I understand that once the contract is signed, if I wish to make any changes to my provision a **minimum of 4 weeks' notice** is required in writing to the school office email address, **and the full agreed fees will be charged.**
- I understand that if my child is sick, or absent for any reason, including holidays in term time, the fees are still payable.
- I understand that an unwell child should be kept at home (if they have been vomiting or had a temperature within 48 hours).
- I understand that failure to keep this agreement may result in the loss of my extended day place.
- We will communicate with you via text to you mobile phone, and email please ensure we have a correct details

Extended Day Care payments

You have agreed to take extended day provision.

You can choose to pay for these with child care vouchers, if you receive them through your place of work, or you can pay for fees directly to the school.

Please tick one option:

Card payment

Child Care Vouchers

I have read and agreed to the stated terms and conditions.

Signed: _____

(parent/carer)

Print Name: _____

Dated: _____