September 2024

EARLY BIRDS BREAKFAST CLUB

Thank you for your interest in Edenbridge Primary School’s Early Birds Breakfast Club.

We run a fun and friendly breakfast club from 7:30am to 8:45am daily in term time (excluding INSET days). The children can have breakfast and play board games, have a go at racquet sports or sit quietly with a book.

The club is open to all pupils from their second year of nursery (from the September before they are due to start school, and after the transition period at the start of the year) to year 6.

**DAILY CHARGES**

**£4.70 per session, including breakfast**

**Booking Process**

In order to apply for a place, we require:

* Signed booking form
* Completed registration forms
* Signed Terms and Conditions

Once we are in receipt of the above we will confirm your registration, at which time you can book your required sessions via the School Gateway app or online at [**https://login.schoolgateway.com**](https://login.schoolgateway.com)**.**

Payment must be made at the time of booking. You will not be able to book your required sessions until payment has been made. If you will be paying by Tax-Free Childcare or childcare vouchers, please see the Parents’ Handbook for further information on the booking process.

If you have any queries, please contact the school office on 01732 863787 or via email at clubs@edenbridge.kent.sch.uk.

Thank you.

The School Office

Edenbridge Primary School

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Early Birds Breakfast Club - Booking Form

Name of child: ……………………………………………..………….……. Year Group: …………………………..…...........

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Name of child: ………………..……………………………………….……. Year Group: …………………………..…...........

Please state the date you wish to commence using the breakfast club

Please cross the box if you will be paying by childcare Vouchers or Tax-Free Childcare

Name of childcare voucher provider or

Tax-Free Childcare reference

**Please arrange for your payment date to be the 1st of each month**

CHILDCARE VOUCHERS AND TAX-FREE CHILDCARE CAN ONLY BE USED FOR EXTENDED SCHOOL CLUBS (EARLY BIRDS BREAKFAST CLUB, THE HOLIDAY CLUB AND THE AFTER-SCHOOL CLUB). IT CANNOT BE USED TO PAY FOR SCHOOL MEALS OR ANY OTHER ITEMS.

# Early Birds Breakfast Club - Contact Details

**Parent/Carer details**

Name

Address

**Contact telephone numbers**

Home Work

Mobile

**Emergency contact details (must be different to above)**

Name

**Contact telephone numbers**

Home Work

Mobile

Early Birds Breakfast Club - Consent

**Please list any medical conditions and/or regular medication your child may need whilst attending the club:**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please give details of any dietary needs or allergies and required action if reaction occurs:**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Additional information about your child (please include any information about SEN that would need to be considered):**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Medical Condition: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Medication: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Whilst attending the breakfast club at Edenbridge Primary School do you the parent/carer give consent for your child to participate in the following (delete where applicable):

|  |  |
| --- | --- |
| **Photographs**I agree that my child can be photographed by school staff for the purpose of use within the school in line with the school’s policy on Photography and Videos at School.  | YES / NO |
| **Application of sun cream**I agree that my child can have their own sun cream applied provided by myself (parent/carer). | YES / NO |
| **EYFS info sharing**I agree that information regarding the progress of my child as part of the EYFS can be shared with the school’s EYFS staff. | YES / NO / N/A |
| **Internet Usage**I agree that my child can use the internet in an adult supervised environment. | YES / NO |

Early Birds Breakfast Club - Terms and Conditions

1. I understand that each session must be booked and paid for in advance.
2. I understand that I can cancel 24hrs or more in advance (via my School Gateway account) and that cancellations within 24 hrs will be charged the session fee.
3. I understand that the session times will run from 7.30am to the start of the school day.
4. I will accompany my child to the door, and understand that in order to receive breakfast, my child needs to be dropped off by 8.15am.
5. I will inform the school and club of any changes to dietary requirements and medical conditions including allergies.
6. I give permission for my child/ward to be given emergency medical treatment if required.
7. I agree to keep my child away from the club if he/she is sick, or advised to do so by the doctor and/or staff members. In the case of vomiting and diarrhoea, your child MUST be kept off school for 48 hours from the last occurrence.
8. I understand that the club will run during term time only, which does not cover non-pupil (INSET) days.
9. I understand that, should the school have to close unexpectedly, the club will not run and refunds will be made (in the form of a credit on my School Gateway account).
10. I agree to abide by decisions made by Early Birds Breakfast Club staff.
11. All children must adhere to the school behaviour policy during the club.
12. I confirm that I have read the Wraparound Care Parents’ Handbook and understand that it forms part of our Terms and Conditions.
13. I understand that fees will increase annually, at the start of each academic year.

Signed Parent/Carer

Full Name

Date

Please now return all completed forms to the school office or by email to clubs@edenbridge.kent.sch.uk.