

LARKS HILL JUNIOR AND INFANT SCHOOL
BREAKFAST CLUB BOOKING FORM

PLEASE PAY VIA PARENTMAIL OR BY CHEQUES PAYABLE
TO LARKS HILL J & I SCHOOL

This form must be brought to school with the
appropriate payment no later than **Wednesday for the**
following week.

Child's name:

Class: _____

PLEASE NOTE BREAKFAST CLUB CHARGE IS £3.00 PER DAY

Please tick which days you want to reserve a place for your child during the

Week beginning:

Monday

Tuesday

Wednesday

Thursday

Friday

I have included £ _____ to pay for the above sessions at **£3.00** per session on the understanding that no money can be refunded.

In the event of an accident, I give club staff members the authority to act upon medical advice if they cannot contact me in time.

Signed _____

Contact telephone number
