



Springfield
Infant School

Breakfast Club Registration Form

Please complete this form and return it to the School Office or email office@springfieldschool.co.uk

NAME OF CHILD

CLASS

I would like my child to attend the Springfield Breakfast Club.

I understand that, while the school staff and helpers in charge will take all reasonable care of the children, unless they are negligent they cannot be held responsible for any loss, damage or injury to my child.

Medical Information

My child has: No illness, allergy or physical disability*

My child has: the following illness, allergy or physical disability*

Please detail below

.....
.....

Medication Required

.....

I consent to any emergency treatment necessary at Breakfast Club YES/NO

Emergency Contact Information

Priority	Full Name	Telephone Number
1		
2		

Method of Payment

Please select your chosen payment method

BACS Springfield Infant School & Nursery **Sort Code 30 00 02 A/C 00070004**

Please ensure payment is made prior to attending the club. Please use your child's name as the payment reference.

Cash or Cheque (Cheques made payable to Springfield Infant School)

If you are working parents, you may be able to benefit from 20% savings by registering for a Government Tax Free account, so for every £8 to place into the account, the government will top up with £2, giving you a 20% saving on your childcare costs. To apply for account please visit: <https://www.gov.uk/tax-free-childcare>

Parent/Carer Name.....Signature.....

Date.....