September 2023

Dear Parents/Carers,

Please find attached a new allergy form which will enable you to support us in breakfast club and afterschool club.

Please note the following points:

* **Bookings and payments for breakfast and afterschool clubs will now be completed on ParentPay**, we can no longer accept phone calls or emails requesting a place for clubs. The form used this year, is no longer available;
* Clubs **MUST** be booked in advance;
* Breakfast club bookings must be **made before 2pm the day before**;
* Afterschool club bookings must be **made by 2pm on the same day**;
* If your child does not attend a pre-booked session, you will still be liable to pay for that session;
* Payment is due in advance, and debts are not permitted to accrue;
* Prebooked sessions can be cancelled with 48 hours’ notice and charges will be removed from your ParentPay account;
* Please be aware that cancelling prebooked sessions may result in losing your child’s place in the provision;
* If you require After School care in an emergency, please call the office on 01952 387580 to discuss, and confirm in writing via email to a2153@taw.org.uk
* An allergy and emergency contact form must be completed;
* Any outstanding balance for the current term must be cleared before bookings for the autumn term can be accepted;
* Due to very high numbers at Breakfast Club, we can no longer accept ‘drop in’ attendance; sessions must be prebooked;

Breakfast club runs from 8.00am-8.40am.  Children will be provided with a healthy breakfast and are offered a range of activities until the start of the school day.  Cost for this provision is £1.75.

After school club is open from 3.20pm-4.00pm at a cost of £2.50 or 3.20pm-5pm at a cost of £5.50. Children will be provided with a snack and a range of activities.

Yours sincerely



Mrs H. Kumar

Headteacher

***Allergy Form***

***Childs Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class:\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Please list any dietary requirements/allergies that your child(ren) may have:***

***1.*** ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***2.*** ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***3.*** ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***4.*** ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***5.*** ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

Parent / Carer Signature:…………………...................................……………. Date:………….....................