



## Westgate Lower School Toast and Tea Breakfast and After School Club - Registration Form

<b>Childs First Name</b>	<b>Child's Surname</b>	<b>What does he/she like to be called</b>
<b>Date of Birth</b>	<b>Current Age</b>	<b>Year Group</b>

### Parents/Carers Details

First Name	Surname	Relationship to child	First Name	Surname	Relationship to child
<b>Home Address</b>					
<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>	<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>

### Emergency Contact Details

We will contact parents/carers in the first instance. Please provide details for *additional* adults that can be contacted in the event of an emergency.

First Name	Surname	Relationship to child	First Name	Surname	Relationship to child
<b>Home Address</b>					
<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>	<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>

### Medical Information

Any medicine taken during Toast and Tea Breakfast and After School Club hours needs to have written parental consent in order for staff to administer them.

<b>Doctors Name</b>	<b>Telephone Number</b>	<b>Medical Information (including allergies)</b>
<b>Address</b>		

## Collection

It is Toast and Tea's Policy to only dismiss a child to the adults named on the Collection slip below, which must be completed on admission to the club.

<b>First Name</b>	<b>Surname</b>	<b>Relationship to child</b>	<b>First Name</b>	<b>Surname</b>	<b>Relationship to child</b>
<b>Home Address</b>			<b>Home Address</b>		
<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>	<b>Home Number</b>	<b>Mobile Number</b>	<b>Work Number</b>
<b>First Name</b>	<b>Surname</b>	<b>Relationship to child</b>	<b>First Name</b>	<b>Surname</b>	<b>Relationship to child</b>
<b>Home Address</b>			<b>Home Address</b>		

## Sessions Required (n/a for holiday club)

Please indicate the sessions that you require.

*Places will be offered with priority given to those requiring the greatest number of sessions.*

	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>
<b>Breakfast</b>					
<b>After School</b>					

## Any Other Information

Additional information that will help us to meet the needs of your child.
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Please complete this form and return to Elise Farzam. Make a £30 non-refundable deposit using your child's name as a reference by BACs to Account No. 70383446 Sort Code: 60-83-71 [We encourage you to read our policies and procedures before registering for a place at Toast and Tea.](#)

[I confirm that I have read and agreed to the terms and conditions of the Toast and Tea Breakfast and After School Club, as outlined in the information booklet.](#)

<b>Signed</b>	<b>Date</b>
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