

Woodlands Infant and Nursery School



Breakfast Club Booking Form

Child's Name: Child's Class:

1) Would you like a **REGULAR** place each week?

Please tick:

Yes please go to question 2

No please go to question 4

2) On which days of the week would you like a **REGULAR** place for your child?

Please tick:

Monday	Tuesday	Wednesday	Thursday	Friday

3) From which date would you like your child to begin attending breakfast club?

.....

Please go to question 5

4) I **DO NOT** require a regular place for my child at Breakfast Club, however I would like to request a place on the following date(s).

Day/Date	Day/Date

5) Are there any special dietary requirements and/or medical conditions or any other information that our breakfast club staff should be aware of?

Please tick:

Yes please give details below

No

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Signed: **Print:**..... **Date:**.....