

Wraparound Care Request Form: **Breakfast Club**

Please tick the academy to which you are requesting 'Wraparound Care':-

	Cucko Hal		Enfield Heights ACADEMY		Kingfisher Hall		all W	Woodpecker Hall		
SECTION A: Pupil's details										
First name:					Surname:					
Year:					Class:					
Half Term: Spring		g Term 1		Dates:		Wed 5 th Jan – Fri 11th 2022				
Please mark an X for each day you would like to enrol your child to breakfast club:										
Man		IUARY 2		Fri		Man		RUARY Wed		Ew:
Mon	Tue	Wed 05 □	Thu 06 □	07 🗆		Mon 31 □	Tue 01 □	02 \square	Thu 03 □	Fri 04 □
10 🗆	11 🗆	12 🗌	13 🗆	14 🗆		07 🗆	08 🗆	09 🗆	10 🗆	11 🗆
17 □ 24 □	18 🗆 25 🗆	19 🗆 26 🗆	20 🗆 27 🗆	21 🗆		00 🗆	00 🗆	00 🗆	00 🗆	00 🗆
Breakfast Club Price Per Day: £2.00]			
Total Term Cost: £										
IMPORTANT: If payments are not made, please make alternative arrangements.										
☐ I have selected all sessions that I would like to enrol my child on the above calendar.										
☐ I will complete / return this form to the school office by Monday 6 th December 2021										
☐ I will login to the 'Parent Arbor App' to register and add my child to the selected sessions										
☐ I will be responsible for paying the fees for the entire half-term in by Friday 31st December 2021 via your Arbor App										
*There will be no refunds unless the school is responsible for cancelled sessions.										
SECTION B: Declaration and Signature of Parent/ Carer										
Print Na	ame:						Date:			
Signatu	re									