

**Blagdon Nursery School**

**Term Time Extended Services Booking**

**for Breakfast Club**

Child’s Name: Group:

**Charges**

Breakfast Club - £5.00 per day *Small optional breakfast available until 8.30am*

**Please complete the form below and tick the sessions you require each week.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Mondays** | **Tuesdays** | **Wednesdays** | **Thursdays** | **Fridays** |
| **Breakfast Club**  From 8.00 |  |  |  |  |  |

**Agreement:**

* I agree that I will not be charged should the Nursery School close for more than 3 days due to health and safety
* I agree that refunds cannot be given for non-attendance, family holidays, sickness or other reasons
* I agree that I will pay the full amount for the termly sessions I have requested within 14 days of receiving my invoice
* I agree to provide a deposit totalling 1 week’s fees of the sessions offered which are paid BEFORE a place can be confirmed.
* I agree that this deposit will be deducted from my child’s final invoice but is non-refundable if I decide not to take up my confirmed place.
* I agree to give 1 months written notice regarding cancelling my child’s place
* I agree to give 1 months written notice regarding reducing my breakfast club sessions
* I agree that non-payment of fees may result in the loss of my child’s space in any of the sessions I have booked.

**I have read and signed the agreement for Extended Services**

Paid Deposit £ Date: \_\_\_\_\_\_\_\_\_\_\_\_ Cash/Cheque (payable to Blagdon Nursery School)

**Signed** (Parental Responsibility):

Please print name: Date

Email address