



Goostrey Before School Club Registration Form

Name of Child

Date of Birth

Year Group

I wish to book **regular days** attending GBSC on:

Monday	Tuesday	Wednesday	Thursday	Friday

Or, adhoc days (giving a minimum of 2 days notice) for week commencing:

Monday	Tuesday	Wednesday	Thursday	Friday

I confirm the contact details provided to the school are up to date and will notify of any changes to these, family circumstances for which any special consideration may be needed, or any Court Orders granted.

I will pay on-line at www.cheshireeast.gov.uk/schoolshop, or I will pay using childcare vouchers issued by for the amount of £4.00 per day as booked above

I give my consent to _____ receiving medical treatment, including anaesthetic, as considered necessary by the medical authorities present, in the case of an emergency.

I have read, understood and agree to comply with the Terms and Conditions of the GBSC.

Name of child/children: _____

Parent/Carer Signature: _____

Name in full: _____

Relationship to the child: _____

Date: _____

Please return this copy to the school reception desk.