

Sacred Heart Catholic Primary School

Breakfast Club Terms and Conditions

1. The Breakfast Club will be run by Sacred Heart Catholic School staff.
2. The Club is open Monday to Friday (term time only). The club is based in the main school hall and can be accessed via the main office entrance. The Breakfast Club is open from 7.50am to the start of the school day.
3. The club will operate for children attending Sacred Heart Catholic Primary School only.
4. A registration form must be completed and returned to the school office for each child attending.
5. The Club will be limited to 30 children, on a first booked, first served basis.
6. The cost of the Club per day is £4.50 including breakfast. If your child requires breakfast please ensure they arrive before 8.15am. If your child is arriving after 8.15am then please ensure you have given them breakfast before they arrive.
7. Bookings and payments for breakfast club must be made through Wisepay at least 24 hours in advance. No further bookings will be accepted within this 24-hour period. We do accept tax-free childcare payments.
8. Parents are able to book regular or ad hoc sessions (subject to availability) on either a daily, weekly, monthly or half termly basis. (Once a completed registration form has been received by the school office).
9. Parents are asked to inform the school of emergency contact numbers, any food allergies or medical information.
10. Parents are asked to keep school informed of any recent changes to contacts etc.
11. Parents will be given one month's notice of any changes in fees. Fees must be paid in advance at the time of booking. The school reserves the right to exclude a child if fees are not paid.
12. Staff will be responsible for the care and management of the children, treating them with respect at all times.
13. There will be at least two members of staff in attendance at any time.
14. All children are expected to behave well, show respect, to be polite, to look after equipment and resources, to be co-operative and courteous to staff and to each other.
15. Children who do not behave well or do not show respect for staff or each other may be excluded from the club.
16. Parents are required to hand over their children to the Breakfast Club staff in person. Parents of any KS2 children making their own way should notify the school in advance.
17. If your child has a place booked and you need to cancel, please contact the school office to do this on your behalf. If your child does not attend without prior cancellation, no credits or refunds can be given.
18. If your child has a place booked and does not attend due to illness/absence from school, a credit will be applied for a future booking.

19. The club welcomes staff and children from all backgrounds regardless of race, gender, religious beliefs and disability. We ensure that all children and staff are treated fairly and equally and comply with the Equality Act 2010 and the Special Educational Needs and Disability Code 2014.

20. The club is committed to safeguarding and promoting the welfare of children and young people and expects all staff to share this commitment.

21. The club follows the same expectations around health and attendance as does the school.

22. The club will not be liable for lost property brought onto the premises by parent/carer or child.

23. The club is covered by the school's insurance

24. At the start of the school day the children will be taken from Breakfast Club to their classrooms in time for registration.

25. The club follows all policies of the school

26. For queries regarding bookings and payments, please contact the school office on 01733 262449 or email schooloffice@sacredheart.peterborough.sch.uk

Please detach and return the agreement slip below retaining the terms and conditions for your information.

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I have read, understood and agree to comply with the Terms and Conditions of the Sacred Heart Catholic Primary School Breakfast Club:

Name of child _____

I have completed a Breakfast/After School Club Registration Form and Booking form Yes/ No

Parent/ Carer Signature _____

Name in full _____

Date: _____