



Blaenhonddan Primary School

BREAKFAST CLUB

Breakfast club starts at 8.15am and
The door closes at 8.30am



Child's Name _____ Class _____

Breakfast Club is FREE for all children.

Attendance:

Please indicate which days your child will be attending the Breakfast Session.
This is only a rough guide as I am aware that they may not always attend.

All Week	Mon	Tues	Wed	Thurs	Fri

Special Dietary Requirements:

Does your child have any food allergies/intolerance? Yes No

If Yes, please provide details.

Other Information:

Please provide details (on the reverse) of any other information you feel relevant to your child's attendance at the breakfast session.

Contact details in case of emergency

Name	Phone Number	Relationship to Child
(1)		
(2)		

I confirm that I would like my child to attend the breakfast club sessions.

Signature of Parent/Guardian: _____ **Date:** _____