 Bowburn Primary School Before and After School Childcare 

Contact Number: 0191 3770497

Tea Club Mobile 07423237393

Opening Times

 Breakfast Club: 7:30am – 8:50am

Tea Club: 3:00pm – 5:45pm

 Fees: The costs below indicate the cost per child, per session.

|  |  |  |
| --- | --- | --- |
| Session | Time | Price  |
| Morning | 7:30am – 8:50am (Food will stop being served from 8.30am) | £4.50 |
|  | 8am – 8.50 am | £3.00 |
| Afternoon | 3pm-4pm | £4.50 |
|  | 3pm-5pm | £6.50 |
|  | 3pm- 5.45pm  | £8.00 |

If your child is attending an after school club and need Tea Club provision after the club finishes, the following costings apply.

|  |  |  |
| --- | --- | --- |
| Session | Time | Price |
| Afternoon | 4pm-5pm | £4.50 |
|  | 4pm- 5.45pm  | £6.50 |

Bookings for Breakfast and Tea Club: Bookings must be made via Parent Pay where you can book up to 100 days in advance with the flexibility that you can cancel any booking you have made up to midnight the day before. When booking, you will be asked to pay for the booked session at the time of the booking; however, you do not need to pay until the day before.

**Please note: If payment is not received by midnight the day before your booking, your child’s place will be automatically CANCELLED and they will be unable to attend the session; therefore, it is very important that you make payment on time.**

 Parents are asked to book the session as required; if, however, you are late and go into the next session then the later amended rate will be charged and vice versa if you have booked a later session and are early an amendment may be arranged.

If you are having any problems accessing your account please contact the school office or if you are having any financial difficulties you can speak to Mrs Glover, the School Business Manager in confidence. The school reserves the right to refuse use of the facilities due to non-payment of fees.

Drop Off & Collection: All children attending Breakfast Club are to be dropped off via the main entrance and must be signed in electronically on our Inventory software situated in the main entrance. For Tea Club, all children are to be collected from Tea Club by a person over the age of 16 and signed out – they must be collected no later than 5:45pm. If the office is unmanned, please ring the Tea Club mobile 07423237393 to let Tea Club know you are there.

The parent/carer contract requires a contact telephone number and address for those persons who are authorised to pick up their children and for use in case of an emergency. You must inform us if these details change or if someone else will be collecting your child.

 AT NO GIVEN TIME WHILE A CHILD IS ATTENDING THE FACILITY WILL HE/SHE BE ALLOWED TO LEAVE WITH ANYONE OTHER THAN THE AUTHORISED PERSON(S) WITHOUT PRIOR PERMISSION. Allocation of Places: The allocation of places will be on a first come first served basis. If the facilities become full, then a waiting list will be created and when a space becomes available, it will be allocated to the first child on the waiting list.

Snacks: A light snack will be available for children until 8:30am at Breakfast Club and until 4:00pm at Tea Club. If your child has any food intolerances or allergies please inform the supervisory assistants of this so that these children can catered for.

Activities: The children will take part in a range of activities suitable for all ages and stages of development enhancing each child’s physical, intellectual, educational, social, cultural and creative development.

Expectations of the Child: Whilst staff will promote and maintain a positive and caring environment, the children are expected to: be polite to staff, parents and each other, show consideration to the needs of others, respond to reasonable instruction given to them by a member of staff and not resort to physical violence. All unacceptable behaviour will be reported to parents/carers and may result in your child’s future use of this service being suspended.

 Accidents and Illness: In the event of your child becoming unwell, you will be contacted immediately. If your child has an accident; a first aider will check them over and deem what first aid is necessary; for minor injuries, a form will be completed and will come home with your child to inform you of their accident. For head bumps and more serious accidents, the parent/carer will be contacted immediately.

Belongings and Personal Property: Children must not bring monies or valuables into the facility; if this cannot be avoided, all valuables should be handed to the supervisory assistants for safekeeping. The facility cannot accept responsibility for loss or damage to belongings and personal property.

Child Protection: The facility has a duty to protect children in its care, not only from risks on site but from forms of abuse (mental, physical, emotional or sexual). Any concerns will be brought to the attention of the safeguard lead and dealt with by the appropriate person. All proceedings and information will remain confidential.

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**Registration Form Parent/Career Contract**

This form must be returned before your child can attend the facilities.

**This document is an agreement between Bowburn Primary School and parents and careers.**

Child(rens) Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Group/Class\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Gender: Male Female

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Post Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate which days your child will be attending the facilities:

Breakfast Club:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| Start time:  |  |  |  |  |  |

Tea Club:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| Finish time:  |  |  |  |  |  |

Name of parent(s)/carer(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Numbers: Day\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Night\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent/Carer Place of Work: Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name of person(s) collecting child if different from above. (Children will only be allowed to leave the facilities with a named person, aged 16 or over).

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medical Information**

Does your child have any known medical conditions/allergies/food intolerances? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Is your child on any regular medication? Yes (please give detail below) No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any specialist requirements? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Childs Doctors Surgery\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctors Contact Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Consents**

|  |
| --- |
| I consent to any emergency medical treatment necessary during the running of the organisation. I authorise the staff to sign any written form of consent required by the hospital authorities if the delay in getting my signature is considered by the doctor to endanger my child’s health and safety. Yes No Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| I understand that staff may take photographs and video recordings of the children taking part in the organisation’s activities. I give my permission for this to happen and give my permission for the photographs and videos to be used for publicity purposes. Yes No Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| I understand that when the children play outside for part of the day when the weather is fine, I give permission for the staff to apply sunscreen provided by the organisation or myself. Yes No Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

I agree to comply with the organisation’s policies and procedures, ensuring fees are paid in advance via Parent Pay, and I agree to abide by the Parent/Carer contract. Yes No

If you are paying using the tax free childcare scheme, please enter your reference number here\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_