

Olney Infant Academy – Breakfast Club Booking Form

Name of Child _____ Class _____

Please tick the appropriate boxes below to say when you would like your child to attend the Breakfast Club.

My child will use the Breakfast Club every day

My child will use the Breakfast Club every... Monday

Tuesday

Wednesday

Thursday

Friday

OR

My child will use the Breakfast Club on the following dates.

OR

I will notify you on an occasional basis (at least 24 hours in advance) when my child will use the Breakfast Club.

Signed _____ (Parent/Guardian)