CONFIDENTIAL		
Bath & North East Somerset Council	Free School Meal Registration Form	
	Benefit Related Free School Meals	
All pupils in Reception, Ye	ear 1 and Year 2 in state funded schools in England qualify	/ foi

· Universal Infant Free School meals (UIFSM), please contact your child's school for this type of free school meal.

FSM24

Relationship

Please register all primary and secondary aged pupils for benefit related free school meals (BRFSM) - if you are in receipt of qualifying benefits as registration will attract additional funding for your child's school for Pupil Premium (£1,480 per Primary pupil and £1050 per Secondary pupil for the financial year 2024-25).

You can register your entitlement for Benefit Related Free School Meals if:

First Name

Parent/Guardian(s) Details

Surname

Title

- you have children who attend a school in Bath and North East Somerset, The Mendip School, Shepton Mallet or if your child is receiving education otherwise than at school (EOTAS) and you are in receipt of any of the qualifying benefits listed overleaf. How to register:
- Complete this form and email it to email it to freeschoolmeals@bathnes.gov.uk or return it to the address overleaf.
- Visit www.bathnes.gov.uk/freeschoolmeals to download and complete a form online.
- Call 01225 394317 to make a telephone registration please leave a message if you reach our answerphone and we will return your call.

Date of Birth National Insurance

Tiue	Surname	FIISLINAITIE		(dd/mi	m/yy)	or NASS number	to child(ren)
				/	/		
				1	1		
Current	t Address includ	ing postcode				dress including postcomoved in the last year)	
Email, _I Telepho	please write clea	arly:		Date of	f Mov	e (dd/mm/yy) / /	1
Depen	ndent Children	Please list all school	age c	hildren v	who y	ou wish to make a clai	m for.
Surname		First Name		Date of Birth (dd/mm/yy) Name of School(s) and Start Date			
			,	′ /			
			/	′ /			
				' /			
			/	' /			

Qualifying Benefits	s					
Which benefit(s) do The date you expe	-		-		ed in the	e last month
Income Support	Job Seekers Allowance (Income Based only)	Su	nployment pport Allowand ome Related only		(<u>without</u> Tax Cred househol	ax Credit any Working lit and have and annuald income (as assessed) below £16,190)
Pension Credit (Guaranteed Element only)	4 Week Run on Working Tax Credit (which is only paid for after you stop qualify WTC)	(Su Imr	ylum Seeker pport under PartV nigration & Asylum		Univers Provided net earne pay) of n assessed to 3 of you assessm confirm	you have an annual ed income (take home o more than £7,400 (as d by earnings from up our most recent ent periods). Please your expected UC t date in comments
No Additional Commo	will check your elig	jibility to qualif	ying benefits o	n your beł	nalf usin	g the DFE online
Free School Meal E Support Number an Declaration : The inf information is held set this information to pro other benefits and ser circumstances as set	d Date of Birth mustormation I have give curely and will be used beess my application rvices. I also agree to	n on this form is ed only for local for free school	d clearly and a complete and a authority purpo meals and share	accurately. accurate. I ses. I agree with other	understa e to the l Council	ind that my personal ocal authority using departments to offer
Signature of Paren					Date	1 1
Send your complet	ted form to: freeso	choolmeals@	bathnes.gov.	<u>uk</u>		
People & Com	Meals (Postal Address munities Finance East Somerset Cou	ncil te	you have any lephone, plea elephone: (012 nail: <u>freeschoo</u>	se contac 25) 39431	t us: 7	d like to register b
OFFICIAL USE ONI	LY					
CTC LINE	FSM HUB	Eligibility CONFIRME	D	INITIA	ALS	DATE