

LANCASHIRE COUNTY COUNCIL

Diocese
of Blackburn



St. John's C.E. (VA) School Cliviger

'Learn, Pray, Care & Play'

Our church school through its Christian values and caring community seeks to inspire each individual to achieve and grow.



St. John's Shooting Stars

Registration and Booking Form

SurnameForename.....

Address.....

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Phone: Home:.....Mobile:.....

Date of Birth..... Year Group.....

Names of Parents/ Guardians.....

Emergency Contact Details	
Mother	Name: Address: Phone:
Father	Name: Address: Phone:
Other State relationship	Name: Address: Phone:

Booking Requirements					
	Monday	Tuesday	Wednesday	Thursday	Friday
Contracted					
Ad hoc					

Please note we require written confirmation of four weeks' notice to amend or cancel contracted payment.

Term times only. Please note that all sessions contracted **must** be paid for, whether attended or not.

The club finishes at 5.45 pm, if you are delayed for any reason please telephone the club to let us know. A late payment fee of £2.00 per 15 minutes will be charged if you collect your child after the club has closed.

Medical Conditions

(E.g. sight, hearing, speech, movement, allergies, conditions)

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Medication:

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*If your child requires medication, please send this to after school club. It will **not** be taken from the red medical bag in class.*

Special Dietary Requirements:

Please advise if your child has any (e.g. allergies, vegetarians or does not consume specific foods/drinks)

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Any Other Relevant Information:

Please ensure you have read the St. John's Breakfast and Shooting Stars Club Parents' Handbook. This can also be found, with supporting policies, on the school website www.stjohnscliviger.com

I hereby consent for my child to take up a place at this club, according to the terms and conditions set out in its policies and procedures. I have understood the expectations and obligations relating to both myself and the club and agree to abide by them.

I understand that persistent late or non-payment of fees will jeopardise my child's continued attendance at the club.

I confirm that the information given above is correct and will contact the school as soon as any of the details change.

Signature of Parent/Carer:

Date:

If you have any questions or comments please get in touch with Mrs Healey.

