



## MARVELS LANE PRIMARY SCHOOL

Riddons Road  
Grove Park  
London  
SE12 9RA

Headteacher: Edward Dove  
Deputy Headteacher: Isabel Hedderman

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### **BREAKFAST CLUB REGISTRATION & BOOKING FORM**

#### **Pupil Details**

Child's Name:

Date of Birth:

Class:

#### **Primary Emergency Contact Information**

Name and relationship to child:

Home Address:

Contact Numbers:

#### **Medical information/Allergies/Special Needs**

Please give full and concise details of any allergies, medical conditions or anything you feel we should know about to help ensure the wellbeing of your child (continue overleaf if necessary).

**I confirm that I have read, understood and agree to abide by the Breakfast Club Terms & Conditions of membership.**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**I would like a place on (PLEASE TICK ALL THAT APPLY):**

Monday	Tuesday	Wednesday	Thursday	Friday
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**This place will be:**

A 'one-off' occurrence	A regular weekly booking
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