



Headteacher: Miss S. Harland
 Magdala St
 Heywood
 Lancs
 OL10 2HN
 Tel: 01706 360494
 e-mail: office@hopwood.rochdale.sch.uk

**Hopwood Hub
 Before and After School Club — Parental Contract and Information**

Complete the following if you would like to enrol your child in the Before and After School Club – Hopwood Hub. Please complete a separate form for each child and return to school.

Name of child			
Year Group			
Date of birth			
Address			
Parent(s) email address(es)			
SEND needs			
Medical needs (including allergies)			
Contact 1 name and relation to child		Telephone contact 1	
Contact 2 name and relation to child		Telephone contact 2	
Contact 3 name and relation to child		Telephone contact 3	

Please circle below which sessions you wish your child to attend.

Times	Charges	Monday	Tuesday	Wednesday	Thursday	Friday
7:30am-8:30am	£4	AM	AM	AM	AM	AM
3:15pm – 6:00pm	£8	PM	PM	PM	PM	PM

Terms and conditions

- I agree to weekly or monthly **payment in advance** by monthly voucher scheme or online payments.
- Children will not be allowed to attend if prior payment has not been made.
- Absences, including illnesses, will be charged at full price.
- Children must be collected from Hopwood Hub before closing time of 6pm. Failure to do so will incur a charge of £1.00 per minute. If children are not collected by 6pm, and Hopwood Hub have had no notification, all emergency contacts will be called. In the event we cannot make contact with anyone, police/Children Social Care will be called.
- Half a term's notice of a termination of contract or reducing of days is required in writing.
- Children will not be allowed to meet parents at the school gates. They must be collected and be signed out at the end of the session.
- The school reserve the right to temporarily suspend a child from the club in the unlikely event of persistent misbehaviour and as a last resort, the Headteacher and the Governing body would review the child's place.
- Parents must keep Hopwood Hub up to date with medical information and emergency contact numbers.
- Please note: There will not be staffing to accommodate one to one support.

Parents Agreement (please tick)

- I hereby give my permission for my child to be taken for emergency treatment to a doctor or the hospital.
- I have read and signed the Before and After School Club **Terms and Conditions** and I agree to adhere to them.

Parent/Carer Signature

Date