

Eye C of E Primary School Wraparound Contract

September 22 – July 2023

I HAVE READ, UNDERSTOOD & COMPLETED ALL PARTS OF THIS FORM AND HAVE READ AND AGREE TO THE TERMS & CONDITIONS ON PAGE 2.

SIGNED: _____ DATE: _____

OFFICE USE ONLY

MANAGER'S SIGNATURE: _____ DATE: _____

Child's full name	Date of birth	Address (inc. postcode)	Primary contact number

AGREED HOURS/SESSIONS:

	7.30am	8.00am		5.00pm	6.00pm
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

I understand that this agreement will commence from this date ___ / ___ / ___

I hereby agree to pay each month to Eye C of E Primary School

SIGNED: _____ DATE: _____

(Signatory will be held responsible for the filled-in content of this pack & for the above terms & conditions)

OFFICE USE ONLY

MANAGER'S SIGNATURE: _____ DATE: _____

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TERMS & CONDITIONS:

- All fees are payable in advance. The payment method must be the same for every month where possible either by BACS as below or cash to the school office.
 - **Bank Details**
 - Account Name: Eye C of E Primary School
 - Sort Code: 20-67-45
 - Account Number: 40293873
 - Please add your invoice number or customer number.
- Fees are due by the 1st of the month, if payment is not received by the 10th of the month children will not be authorised to attend. Your child's place may be withdrawn if payment is not received by the agreed date.
- Full payment is required for all holidays that are applicable to the days of attendance chosen & any absences due to sickness.
- Extra days are possible, subject to availability, & will be charged separately as 'Extra Sessions'.
- I understand that I will be charged a late pick up fee of **£3.50** if the named child is collected later than the club closing time of 6pm and a subsequent £3.50 for each five minutes of lateness thereafter until the child is collected.