**SASCS SCIO**

**SESSION 2022-2023**

**BREAKFAST CLUB WAITING LIST CONTRACT**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s Name |  | | | | Year Group and Class (e.g. 3b)  Please detail your child’s class **NEXT YEAR** | | |
| 1. **Breakfast Club Waiting List**  If your child is already on our waiting list for the breakfast club please write YES in the boxes of the days you would like your child to stay on our waiting list  * If you wish to add days on our waiting list for your child please write ADD   **OR**   * If you no longer require one or more days please mark the box with a CROSS | | | | | | | |
| Day | | Monday | Tuesday | Wednesday | | Thursday | Friday |
| **Days required** | |  |  |  | |  |  |

# Signed………………………………………………Date………………………

**Print Name**………………………………………………….

*A £10 registration fee is payable per family if registering for the first time and should be enclosed with this form.*

**BEFORE SIGNING THIS FORM PLEASE ENSURE THAT YOU HAVE READ, UNDERSTOOD AND SIGNED SASCS PRIVACY NOTICE WHICH DETAILS HOW THE DATA YOU PROVIDE WILL BE STORED AND USED DURING YOUR CHILD’S ATTENDANCE AT SASCS. FULL DETAILS OF SASCS DATA PROTECTION POLICY IS AVAILABLE ON OUR WEBSITE.**