



Cotwall End Primary School

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Cotwall End Road, Sedgley, Dudley, West Midlands, DY3 3YG  
Tel: 01384 818730 Email: [info@cotwall.dudley.sch.uk](mailto:info@cotwall.dudley.sch.uk)

## **Cotwall End Primary School - Wraparound Care** **2021-22**

### **Breakfast Club**

Breakfast Club runs during term time from 7.30am until 8.40am Monday to Friday. Bookings must be made via ParentMail one week in advance. Upon arrival, every child must be signed in by an adult. Children must not arrive unaccompanied. In the interest of safety, please do not drive onto school premises.

### **FEES AND PAYMENT**

The cost of Breakfast Club is £3.50 per session, per child.

Fees are payable ONE WEEK in advance and all payments must be made via ParentMail.

**Contracted hours must be paid for every week, whether your child attends or is absent for any reason.** Periods of extended illness (over 2 weeks) will be charged on a half-fee retainer rate.

Local Authority financial regulations state that all fees must be paid in advance. Any outstanding balances will be actively pursued and Governors have resolved to take action over outstanding balances exceeding £200.00.

### **After School Club**

After School Club runs during term time after school until 6.00pm Monday to Friday. Bookings must be made via ParentMail one week in advance. Emergency same-day bookings can be requested by emailing us on [aclub@cotwall.dudley.sch.uk](mailto:aclub@cotwall.dudley.sch.uk), however emergency places are not guaranteed, depending on numbers and staffing.

### **FEES AND PAYMENT**

Fees are payable ONE WEEK in advance and all payments must be made via ParentMail.

The cost of After School Club is £5.50 per child from end of school until 4.30pm and £8.00 per child from end of school until 6.00pm.

**Contracted hours must be paid for every week, whether your child attends or is absent for any reason.** Periods of extended illness (over 2 weeks) will be charged on half-fee retainer rate.

If any child is not collected by 4.30pm, the full cost of session two will be payable.

If any child is not collected by 6.00pm, an extra fee of £5.00 per 15 minutes will be charged.

Local Authority financial regulations state that all fees must be paid in advance. Any outstanding balances will be actively pursued and Governors have resolved to take action over outstanding balances exceeding £200.00.

## Registration Form - Cotwall End Wraparound Care

Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Class: \_\_\_\_\_

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Child's Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Class: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_ Home Telephone Number: \_\_\_\_\_

### Contact Details

Priority	Title	First Name	Surname	Relationship to child
1				
Address			Email Address	
Home Phone:	Mobile:	Work Phone:	Main Phone Number: Home / Mobile / Work	

Priority	Title	First Name	Surname	Relationship to child
2				
Address			Email Address	
Home Phone:	Mobile:	Work Phone:	Main Phone Number: Home / Mobile / Work	

### IN THE EVENT OF AN EMERGENCY, IF PARENTS CANNOT BE REACHED, PLEASE CONTACT:

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Has your child any known allergies or illnesses? \_\_\_\_\_

Prescribed medication taken on a regular basis: \_\_\_\_\_

Is there any food that your child must not be given due to health or religion? \_\_\_\_\_

Dietary Requirements: \_\_\_\_\_

Religion: \_\_\_\_\_ Ethnic Origin: \_\_\_\_\_

Please list here any other information we should be aware of: \_\_\_\_\_

\_\_\_\_\_

Parent/Carer Signature: \_\_\_\_\_

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

## Breakfast Club - Parental Contract

### AIMS

The club aims to provide the following:

- A variety of activities
- A safe, caring, and stimulating environment for all children to play and learn in both structured and unstructured play settings
- High quality after-school care
- High standard of qualified and experienced staff
- Commitment to equal opportunities
- Safe and educational equipment
- Copies of all club policies and procedures available
- Breakfast comprising of a drink, cereal, toast and fruit
- A secure environment
- Compliance with OFSTED Registration and Inspection requirements

The club expects you as parents/carers and children:

- To complete a club parental contract along with personal and medical details form
- To be familiar with the club's rules and behaviour policy
- If your child is ill or will be absent from the club for any reason you must inform the club 01384 818708 You will still be required to pay for your place/s in full unless the absence is due to a school initiated activity or if any illness lasts over 2 weeks, then half pay retainer fee is payable
- To sign your child out on leaving the club
- To make the club aware of any special requirements your child may have
- To inform the ASC of any changes in details given on forms completed such as emergency contact details and persons authorised to collect your child/ren

Many parents have indicated that they work a 2 week shift pattern, please indicate this using the week 1, week 2 option. If you need to make specific arrangements due to other work patterns, please contact the school office so that we can endeavour to accommodate your needs. Any changes to work patterns must be notified to school 2 weeks prior to the change.

I wish my child/ren to attend the following sessions:

	Week	Monday	Tuesday	Wednesday	Thursday	Friday
7.30am to 8.40am	Week 1					
7.30am to 8.40am	Week 2					

Any permanent alterations to these contracted hours must be made in writing, giving a minimum of two weeks' notice. Termination of this contract must be given in writing by either party, giving a minimum of two weeks' notice. Breakfast Club reserves the right to either temporarily or permanently exclude any child in the event of persistent misbehaviour.

AS THE PARENT/CARER OF \_\_\_\_\_  
I HAVE READ THESE CONDITIONS AND AGREE TO ABIDE BY THEM.

Parent/Carer signature: \_\_\_\_\_

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

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

## After School Club - Parental Contract

### AIMS

The club aims to provide the following:

- A variety of activities
- A safe, caring, and stimulating environment for all children to play and learn in both structured and unstructured play settings
- High quality after-school care
- High standard of qualified and experienced staff
- Commitment to equal opportunities
- Safe and educational equipment
- Copies of all club policies and procedures available
- A drink and a small snack
- A secure environment
- Compliance with OFSTED Registration and Inspection requirements

The club expects you as parents/carers and children:

- To complete a club parental contract along with personal and medical details form
- To be familiar with the club's rules and behaviour policy
- If your child is ill or will be absent from the club for any reason you must inform ASC via the email [aclub@cotwall.dudley.sch.uk](mailto:aclub@cotwall.dudley.sch.uk) as soon as possible
- You will still be required to pay for your place/s in full unless the absence is due to a school initiated activity or if any illness lasts over 2 weeks then half pay retainer fee is payable
- To sign your child out on leaving the club
- To make the club aware of any special requirements your child may have
- To inform the ASC of any changes in details given on forms completed such as emergency contact details and persons authorised to collect your child/ren

I wish my child/ren to attend the following sessions:

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>Session 1</b> End of school - 4.30pm					
<b>Session 2</b> End of school - 6.00pm					

Any permanent alterations to these contracted hours must be made in writing, giving a minimum of two weeks' notice. Termination of this contract must be given in writing by either party, giving a minimum of two weeks' notice. After School Club reserves the right to either temporarily or permanently exclude any child in the event of persistent misbehaviour.

AS THE PARENT/CARER OF \_\_\_\_\_  
I HAVE READ THESE CONDITIONS AND AGREE TO ABIDE BY THEM.

Parent/Carer signature: \_\_\_\_\_

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

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

## Permission to seek Emergency Medical Advice or Treatment

In the event of an accident occurring to my child \_\_\_\_\_

- I give permission for any member of staff of Cotwall End After School Club to administer first aid and/or seek emergency treatment/advice from a hospital, doctor or nurse. I understand that all possible efforts will be made to contact me in such a situation and I will be made aware of the accident as soon as possible.

## Photograph Permission

- I give permission for photos of my child in After School Club to be used on display boards. The photographs may also be used for evidence for Ofsted inspections and to give you an opportunity to see what your child does in after school club.

## Sleep Permission

- I give permission for my child to sleep if they wish. The maximum time limit I wish for my child to sleep for is \_\_\_\_\_

Child's Name \_\_\_\_\_

Parents Signature \_\_\_\_\_

Date \_\_\_\_\_

**After School Club - Collection and Password**

Dear Parent/Carer

As a safety precaution, please let us know the names of any people who may collect your child/ren from After School Club. Please remember to include yourself.

Name(s) of Child(ren): \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number \_\_\_\_\_

**Please provide a password that we can ask for**

Password: \_\_\_\_\_

Many Thanks