



Hunwick Primary School

Wraparound Care

Parental contract and booking form

AGREEMENT

As the parent/carer of:

(Child's name).....

I have received a copy of the information and contract rules booklet and have read and understood the terms and conditions and agree to adhere to them.

This provision is offered in accordance with the Equality Act 2010, which avoids discrimination and promotes equality with regard to the 'protected characteristics'.

By signing this document you are agreeing to staff seeking any necessary emergency medical advice or treatment during their time at Hunwick Primary School Wraparound Care Club.

Name:.....

Relationship to child:

Signature:.....

Print name

Date

FOR OFFICE USE ONLY

Signedon behalf of Hunwick Primary School

Print Name

Date

NB: If you have more than one child, we require a completed form for each child.