

Breakfast Club Application form



Please complete all sections of this form in **BLOCK CAPITALS**. If you need help completing the form our school office staff will be happy to assist you.

NAME OF CHILD (IN FULL) _____ CLASS: _____

ADDRESS: _____

_____ POST CODE: _____

HOME TEL NO: _____ MOBILE NO: _____ WORK TEL NO: _____

NAME OF PARENT(S)/CARER(S)/GUARDIAN(S) _____

DOES YOUR CHILD HAVE ANY SPECIAL DIETARY NEEDS _____

IS YOUR CHILD A VEGETARIAN

YES

NO

I DECLARE THAT THE INFORMATION I HAVE GIVEN IS CORRECT AND COMPLETE. I UNDERSTAND THAT SHOULD ANY OF THE INFORMATION BE SHOWN TO BE FALSE, THIS WILL LEAD TO THE WITHDRAWAL OF A PLACE, EVEN IF THE CHILD HAS STARTED AT THIS SCHOOL. I ALSO UNDERSTAND THAT THE INFORMATION THAT I HAVE PROVIDED ON THIS FORM IS COVERED BY THE DATA PROTECTION ACT 1998. (PLEASE READ THE PARAGRAPH BELOW BEFORE SIGNING THIS FORM)

SIGNED: _____ DATE: _____
(Parent/carer/guardian)

DATA PROTECTION ACT 1998

This act regulates how we obtain and use information about individuals. The information you supply is being collected for the purpose of providing an education service but may be used for wider purposes. When you sign this document you are consenting to that use. The information may be shared with other internal directorates of London Borough of Lambeth, those with parental responsibility, education establishments, other LA's and the Department of Education & Skills.

