

**Wraparound Care Agreement**

**Wraparound care is flexible and you can change your booking weekly in advance (depending upon availability of spaces)**

Please sign the following undertaking in respect of the Waparound Care fees for you child at Goodway Nursery School:

* I agree to book and pay weekly in advance.
* I understand that if I do not pay my fees weekly in advance I will forfeit my place.
* I agree to give one week’s notice in writing if I wish to give up my child’s place, and that no refunds will be given.
* The school will refund the fee when the school is closed for a day for staff training
* If my child is ill or does not attend any session that has been booked for them the full fee will be charged.
* I agree that my child will not attend Wraparound Care for 2 days of first receiving antibiotics for a medical condition and 48 hours if experiencing sickness and/or diarrhoea.
* I understand that I should call 0121 464 3078 as soon as possible if I am running late.
* I understand that there is a **penalty payment** of £5 per child the second time I am more than 15 minutes late when collecting my child and that I will be charged £5 per additional 15 minutes or any part of 15 minutes.

Please remember that after 15 minutes it is our standard policy to put into action our procedures for late collection of pupils.

* Place required (Please circle):

**Morning session:**

* 8am - 9am @ £5 per session (including breakfast): **MON TUE WED THUR FRI**

**Afternoon session:**

* 3pm – 4pm @ £5 per session (including snack): **MON TUE WED THUR FRI**

Name of parent/carer:

Name of child:

Allergies: Dietary requirements: Medical requirements:

Start date:

Signature of parent/carer:

Head Teacher’s signature:

*Copy for parent/carer & copy paced in child’s file*

Signed: ...................................................................................... Date:...............................................