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Headteacher: Mrs Chisnall



#### **Newton-le-Willows Primary School**

Sanderling Road Newton-le-Willows Merseyside WA12 9UF

## Newton Early Birds and Night Owls

# Early Birds and Night Owls Contract

I would like to a book a place in Newton-le-Willow's 'Before and After School Club' for my child/children, and to be added to the Before & After School Group on the 'School Money App'.

Name of Child/ren	Class

I understand that by signing this contract I am agreeing to book any places I need for my child(ren) from **Thursday 4th September 2025**, using the 'School Money App' and that all sessions must be paid for at the time of booking. This contract expires on **Friday 17<sup>th</sup> July 2026**.

### **Weekly Sessions (term time only)**

Early Birds (Breakfast Club) - Monday-Friday 7.30am — 8.50am	£5.50 (1st child) £4.50 (sibling)
Night Owls (After School Club) - Monday-Friday 3.20pm - 6.00pn	n £8.00 (1st child) £7.00 (sibling)

If you wish to terminate the contract during the twelve-month period, please let Mrs Hayward or Miss Dale know and they can remove you from the 'School Money App Group'.

I understand and agree to the terms set out above and wish to be added to the 'School Money App Group' to book my own sessions and pay for these at the time of booking. If using vouchers, I understand that I need to be in credit before I am able to book my own sessions on the 'School Money App Group' and that I cannot run a debt on this system — otherwise I will be removed from the 'School Money App Group' and no longer able to book any further club sessions until this debt has been cleared. Sessions will be bookable up to a term in advance. I understand that these sessions are on a first-come, first-served basis, days cannot be guaranteed as available, and that I cannot book a place once a session is full.

Print name	Date
Please <u><b>sign</b></u> to a	ccept the above conditions
If payment by vo	ouchers please specify which company
[ ] Vouchers	[ ] School Money
i icase iliaicate b	clow your preferred method or payment by ticking the box.

Please indicate below your preferred method of payment by ticking the box

### Early Birds and Night Owls Contract Continued

Child's name	
Parent or carer's name _	

I consent for my child to attend Newton Early Birds (Breakfast Club) and Night Owls (After School Club). I understand that the club has policies and procedures (which are available for reference at the club), and that there are expectations and obligations relating both to the club and to myself and my child, and I agree to abide by them.

- I understand that Newton Early Birds and Night Owls is a play setting and that whilst my child is there the staff are legally responsible for them.
- My child will be provided with a snack and drink whilst at the club unless otherwise requested.
- It is my responsibility to alert club staff to any dietary or medical conditions when applying for a place.
- Once my child arrives at Newton Early Birds and Night Owls they will be in the care of the club staff until collected and signed out by an authorised person.
- I will pay for all sessions at the time of booking and will not be refunded for a booked place unless the school is closed. The accrual of late payments or debt will put your child's place at risk and the place for your child may be terminated by being removed from the 'School Money App Group'.
- All sessions need to be booked by Friday at 6pm, for the following week.
- Sessions will be bookable up to a term in advance. I understand that these sessions are on a first-come, first-served basis, days cannot be guaranteed as available, and that I cannot book a place once a session is full.
- Personal information will be taken from the school database, and it is the parent/carer responsibility to keep records up to date
- Places at the school club may be terminated if your child's behaviour becomes unsafe, or your child is not following the club rules e.g. refusal to follow instructions, damage to property, physical harm to staff or pupils.
- It is my responsibility to keep the club manager informed of any alterations to the information regarding my child (eg. contact details, medical conditions, etc.)
- I accept that my child may take part in messy activities whilst at Newton Early Birds and Night Owls. I understand that I can provide my child with appropriate clothing to accommodate this if I wish.
- Night Owls closes promptly at 6.00pm. If, due to unforeseen circumstances, I am going to be late, I will contact the manager as soon as possible on **07519808650**.
- If I do not collect my child by 6.00pm I will pay a charge of £7.50 per quarter hour to cover the costs of the two staff who are legally required to supervise my child.
- If I do not collect my child by 6.30pm, and the club has been unable to reach me or any of my emergency contacts, I understand that Newton Early Birds and Night Owls will follow its **Uncollected Children Policy** and contact Social Care.
- Whilst Newton Early Birds and Night Owls tries to ensure the safety and security of items, I understand that it cannot be held responsible for any loss or damage of my child's property.
- If there are any accidents or incidents involving my child at the club, I will be informed.
- If my child has an accident at the club, they will be treated by a qualified first aider and I will be informed as soon as possible. There will also be a first aid slip to sign (white slip) which the club staff keep and file. The other slip (blue) will be for the parent/carer to take home. If my child needs urgent medical treatment and I am unavailable, a member of staff from Newton Early Birds and Night Owls will sign any consent forms necessary for treatment on my behalf as stated on the club's medical form.
- Information held by Newton Early Birds and Night Owls regarding my child will be treated as private and confidential. However, in certain circumstances, for example if there are child protection concerns, I understand that the club has a legal duty to pass certain information on to other agencies, including the Police, Social Care and Health Care Professionals.

I have read and understood the above terms and conditions and I agree to	abide by them.
Signature:	
Print name:	-
Date:	-









