

Signature:\_









## **Booking form French Club**

Classes will take place on Wednesdays 12.15 - 12.45 for KS2 and 12.45-1.15 for KS1. They are £6 per session plus the cost of the book £16 (if you don't have one already) payable by bank transfer before the start of the lessons. There will be 11 classes in the Spring term.

To book your child's place, please complete and return scanned copy of this form to this form to french.beata@gmail.com. Confirmation of your booking will be sent to you by email.

Child's Name:	Date of Birth:
Parent(s)/Guardian(s) Name:_	
Telephone no.:	
Email:	
Home Address:	
My child needs to be taken to My child will be collected by:	Wacky: yes / no
Health Conditions & Allergies Please write any health condit "NONE KNOWN" below.	tions or allergies your child has below. If they have none, please wri
Does your child have any speci	ial educational needs or disabilities which may affect their learning? <b>Y</b>
	nformation for you in order to maximise your child's learning experienc grounds when accepting children into language classes).
Please tick to confirm:	
My child does not have an you deem suitable.	ny food allergies and I give permission for him/her to be given any foo
I give permission for my ch	nild's photograph to be used on Social Media.
	nild's photograph to be used for promotional purposes.
_	utor to seek medical advice or provide treatment in an emergency
☐ I have read and understoo fully.	od the terms and conditions given to me and agree to comply with the
e ,	ails to be used to inform me of other classes and services. I understandscribe at any time. (Your contact details will not be passed to any thi
<b>Privacy policy</b> All the personal information of	collected on this booking form is requested to operate the agreeme
•	t be passed on to any third party and will be deleted when your child

Date:\_\_