Tree Tops Link Club 2024-2025



Name of Child:					
Year Group and		Registration Form			
Address				l	
Names of guardians authorised to collec			bile Number	Work Number	Home Number
•	e a password to be collects your child.	_	vent that a family	member of friend	not known to
link club staff c	collects your child.			member of friend	not known to
link club staff c	collects your child. rs – Please tick ses				not known to
New Customer Breakfast	collects your child. rs – Please tick ses	sions required	(All sessions subj	ect to availability)	
link club staff o	collects your child. rs – Please tick ses	sions required	(All sessions subj	ect to availability)	

Exiting Customers – Changing session times

Please complete this section if you would like to change or add to your current sessions. Only include those sessions you would like to stop attending. If you would like additional sessions, please indicate which days you would like.

	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Ceasing					
Breakfast Starting					
After school					
Ceasing					
After School					
Starting					
With effect from					

Parent Declaration

I confirm that I have read and understood the link club policy, terms and conditions.

By signing this agreement, I understand that I have entered into a contract with Treetops @GSP Before and After School Link Club and will adhere to the guidelines, including payments.

Name of parent / carer:	
Signature:	
Date:	

Once you have completed this form please return it to the school office or email to treetops@greatsankeyprimary.tcat.uk.com. For full terms and conditions, please refer to the Tree tops Link Club policy and handbook on our website at www.greatsankeyprimaryschool.co.uk

For Office Use:

Headcount	Registers	Invoice	Confirmaton	Other