

# Shorne Church of England Primary School



## Breakfast Club

Breakfast Club – Preferred days

Child's name/s: \_\_\_\_\_  
\_\_\_\_\_

Class/es: \_\_\_\_\_

**Days required (please circle):**

Monday                      Tuesday                      Wednesday                      Thursday                      Friday

Please let us know of any allergies your child/children may have:

.....  
.....  
.....  
.....

Parent/carer name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_