



Navenby Church of England Primary School

East Road, Navenby, Lincoln. LN5 0EP. Tel: 01522 810628
Email: enquiries@navenby.lincs.sch.uk
School website: www.navenbyschool.com
Headteacher: Mr C Elliott NPQH BA (Hons) QTS



Breakfast Club Booking Form 2026/2027



Breakfast Club runs from 7.45am until 8.45am each day. Children need to be in school before 8.30am if you wish them to have breakfast. Forms can be completed here on an ad-hoc basis or a regular book form is also available should you need the same days each week going forward. Please tick the days which you would like your child to attend and return the form to the School office clearly marked "Breakfast Club". **PAYMENT MUST BE MADE EACH HALF TERM IN ADVANCE TO ENSURE YOUR CHILD'S PLACE.** If you need to cancel a session, 2 weeks notice is required in order for credit to be held. Thank you.

Child's Name: Class:

AUTUMN TERM 1

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
31 st August	CLOSED	CLOSED	CLOSED				
7 th September							
14 th September							
21 st September							
28 th September							
5 th October							
12 th October							
19 ^h October							

Total amount due (PAID BY 11/09/26): £ _____

AUTUMN TERM 2

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
2 nd November							
9 th November							
16 ^h November							
23 rd November							
30 th November							
7 th December							
14 th December							

Total amount due (PAID BY 06/11/26): £ _____



SPRING TERM 1

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
4 th January	CLOSED						
11 th January							
18 th January							
25 th January							
1 st February							
8 th February							

Total amount due (PAID BY 08/01/27): £ _____

SPRING TERM 2

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
22 nd February							
1 st March							
8 th March							
15 th March							
22 nd March					CLOSED		

Total amount due (PAID BY THE 26/02/27): £ _____

SUMMER TERM 1

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
12 th April	CLOSED	CLOSED					
19 th April							
26 th April							
3 rd May	CLOSED						
17 th May							
24 th May							

Total amount due (PAID BY THE 16/04/27): £ _____



SUMMER TERM 2

Week Commencing	Monday	Tuesday	Wednesday	Thursday	Friday	Total Sessions	Total cost @ £6.00/ session
7 th June							
14 th June							
21 st June							
28 th June							
5 th July							
12 th July							
19 th July				CLOSED	CLOSED		

Total amount due (PAID BY THE 05/06/27): £ _____

Terms of this booking:

- The club runs term time only and not on Inset Days.
- **PAYMENT MUST BE MADE EACH HALF TERM IN ADVANCE TO ENSURE YOUR CHILD'S PLACE.**
- The school reserves the right to withhold Breakfast Club provision for your child/ren if fees are not paid
- Payment will not be refunded for non attendance.
- If you need to cancel your session 2 weeks notice is required in order for credit to be held.
- Credit must be used during the academic year it was accrued.
- A notice period of 4 weeks is needed for changes to regular bookings.
- Parent/carers must inform the school office of any change in contact details.
- Parent/carers are asked to instil the importance of good behaviour at Breakfast Club.
- Parent/carers are asked to instil the importance of good behaviour at Breakfast Club. Poor behaviour choices won't be tolerated. If a child receives three warnings for persistent poor behaviour this will result in a period of exclusion from Breakfast Club for 4 weeks. We will notify parents of each warning given. Any loss of days due to this exclusion will be held in credit to be used against the next invoice.
- Parent/ carers must drop off directly at Breakfast Club, to sign their children in each morning.
- Parent/ carers are asked not to park anywhere that will cause danger or obstruction when dropping off – e.g. in front of the school gates or on school no-parking zones

Child's Name: _____ Class: _____

Parent's Name: _____ Date: _____

