

**Clubs@Torridon**

**Parental Agreement Form**

* I have read and accept a copy of the Torridon Primary School Wraparound Care Policy and agree to abide by the contents therein
* I accept that all sessions need to be booked two weeks before attendance and paid for in advance.
* I accept that sessions will still be charged if cancelled with less than 48 hours' notice.
* The sessions in this contract are 7.45 am to 8.55 am and/or 3.15 pm to 6.00 pm.
* I accept that should my child's behaviour be unacceptable during the sessions the offer of the Wraparound Care service may be withdrawn.

Name of Child/ren: ………………………………

Class /es: …………………………….

Print Name: ………………………..

Signed: ……………………….

Date: …………………