





 Genehmigte bilinguale Ersatzschule – Grundschule und Integrierte Sekundarschule

After School Care Form

Child's Name:	
Grade:	
Child's Name:	
Grade:	
Child's Name:	
Grade:	
Mother	
Name:	
Home Address:	
Contact Phone Numbers (work & mobile):	
Email:	
Father	
Name:	
Home Address:	
Contact Phone Numbers (work & mobile):	
Email:	

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If anyone else is authorised to collect the child fro provide details:	m After School Care on a regular basis, please
Full Name:	
Contact Phone Numbers (work & mobile):	
Email:	
Medical Details	
Doctor's Name:	
Doctor's Address:	
Doctor's Contact Phone Numbers:	
Relevant Medical History: e.g. allergies	s, special dietary
Name/Information:	
Name/Information:	
Name/Information:	
Name/Information:	
I hereby give my permission for the staff of Berlin attention for the above named child/ren in the ev	
Signature of Parent/Guardian	







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After School Care Payment:

Parents who use the After School Care pay 7.50 Euro per hour (or part thereof) and will be invoiced a
the end of each term.
Late nick-up fee after 5 00nm: €15 per 15 minutes

Late pick-up fe	e after 5.00pm:	€15 per 15 minutes.				
My child/ren will attend the After School Care facility regularly (if known):						
Monday \square	Tuesday 🗆	Wednesday □ Thu	ursday \square	Friday 🗆		
Note: The number of places is limited.						
Please hand in this form to Ms April Ewert (<u>april.ewert@berlinbritishschool.de</u> or <u>afterschool.care@berlinbritishschool.de</u>).						