

INVOICE – SEPTEMBER 2018

Laurence Thonon
69 Woosehill Lane
Wokingham
Berkshire RG41 2TR
Tel : 0777 265 83 87
laurencethonon@yahoo.com

Please return the slip to the school's office by Friday 20th July at the latest (or email or post to my address after this date). Your child has been automatically reallocated their place on the course as per T&C's. We hope to see all children in September but **if your child will not continue classes in September, you need to give me notice immediately (half a term's notice in writing is normally needed - see your terms and conditions form).**

Payment to reach my account by 31st July please: account 90015517 sort code 60-24-21. If you have any queries, please don't hesitate to contact me.

Best regards,
Laurence Thonon

Term dates: Term runs from Monday 17th September to Friday 7th December 2018, (11 weeks)

Year group	Programme	Day and time	Tuition fees	Book/CD pack
Y1	Les aventures – Part 1 – 30 minutes	Thursday 3.30-4.00pm	£66.00	£20.00
Y2	Les aventures – Part 2 – 30 minutes	Thursday 12.30-1.00pm	£66.00	£20.00

Extracts from terms and conditions

This is a gentle reminder that, when you sign your child up for classes, "you agree that your child will come to French classes on an ongoing basis (your child will be automatically reassigned his current class each term or a class that suits his age and abilities best when appropriate) and that invoices will be automatically issued for the term's fees prior to the start of each term, unless you give a half term's (5 or 6 weeks) notice in writing if you decide to withdraw your child from classes. If you fail to give notice, you will be charged and you accept to pay a half term's notice to the teacher".

All fees in relation to the full term should be paid prior to the start of term, after which we reserve the right to charge £5.00 as administration fee plus £1.00 per week extra for non-payment.

Privacy policy

All the personal information collected on our booking form is requested to operate the agreement between you and us. It will not be passed on to any third party and will be deleted when your child is no longer attending our classes.

Please complete, detach and return with payment

LOCATION		Walter Infant School	
PUPIL NAME			
DAY AND TIME			
DATE OF BIRTH			
PARENT/GUARDIAN NAME			
ADDRESS			
TEL		MOBILE	
EMAIL (capitals please)			
PAYMENT <input type="checkbox"/> ONLINE (account 90015517 sort code 60-24-21, use your child's name as reference please)		Tuition fees:£66.00..... Book pack:£20.00..... Total paid:£86.00.....	
Please tick to confirm: <input type="checkbox"/> I agree for my email address to be used to inform me of other classes and services. I understand that I will be able to unsubscribe at any time. (Your email address will not be passed to any third parties)			

IMPORTANT DOCUMENT- TERMS AND CONDITIONS

PLEASE READ



Please keep page 1 for future reference. Page 2 must be signed and returned to the teacher prior to commencement of classes. Please keep the first page for future reference. No child will be permitted to class unless this is returned.

TERMS AND CONDITIONS BETWEEN

Laurence Thonon of 69 Woosehill Lane, Wokingham, Berkshire RG41 2TR (tel: 0777 265 83 87) ("the teacher") and the parent/guardian of

(Child's name).....

(Child's name).....

1. All fees in relation to the full term should be paid **prior** to the start of term, after which we reserve the right to charge and administration fee of £5.00 plus £1.00 per week extra for non-payment and if there is persistent delay, may require the pupil's removal from the class.
2. All fees are subject to revision from time to time, reasonable notice being given in respect of any such revision.
3. All activity books and CDs are an integral part of the course. No pupil is allowed to continue with the lessons if the relevant La Jolie Ronde book and CD has not been purchased for him/her. This is to ensure the very high quality of the La Jolie Ronde method. All books are to be purchased and paid for within the first two weeks of starting the course.
4. All fees must be made payable to the teacher. The teacher has taken out a licence to use the La Jolie Ronde method. He/she is self-employed. If you wish to pay by cash, please make sure the money is in a sealed envelope *with the name of your child and his/her group*. The sealed envelope should then be given to the teacher. A receipt will be forwarded to you by return, by the teacher.
5. No remission of fees will be given for absence, except when due to long illness – over four continuous weeks – and supported by a doctor's note, or at teacher's discretion.
6. **You agree that your child will come to French classes on an ongoing basis (your child will be automatically reassigned his current class each term or a class that suits his age and abilities best when appropriate) and that invoices will be automatically issued for the term's fees prior to the start of each term, unless you give a half term's notice in writing if you decide to withdraw your child from classes. If you fail to give notice, you will be charged and you accept to pay a half term's notice to the teacher.**
7. The teacher reserves the right to require the removal of your child if he/she has not maintained satisfactory standards of conduct or whose presence in the class is held to be disruptive and undesirable and the teacher will notify you should this problem arise. Removal of your child will only take place as a last resort after all other avenues of help & support have been given.
8. For parent and child classes, parents are at all time responsible for the behaviour and safety of their child.
9. During bad weather you are advised to contact the teacher before setting out to check whether the classes are running.
10. The teacher is only responsible for children within the classroom during scheduled class hours, and it is your responsibility to ensure that your child is collected on time.
11. Should your child suffer from a medical condition requiring special care please inform the teacher in writing at the enrolment stage.
12. From time to time the teacher may introduce French food into the classes to demonstrate a French breakfast, for example. Please state on the reply slip below whether your child suffers from any food or drink allergies, e.g. nuts, milk, etc., giving full details.
13. Please state below whether or not you have any objection to your child being given sweets in any lesson (as a reward, for example).
14. The teacher may wish to involve the local press on occasion, when presenting certificates to the children or when holding special events to promote the classes. We require your permission before your child's name and photograph can appear in print. Please state on the reply slip below.
15. In case of school closure outside the teacher's control or a cancellation of class by the school (for example strikes, very bad weather etc), the teacher will endeavour to propose an alternative class. Should the pupil not be able to attend the alternative class, no refund or credit will be issued.

PLEASE COMPLETE AND RETURN TO THE TEACHER

Please delete as appropriate and inform the teacher of any change: -

EITHER



Please tick to confirm:

- ☐ I have read and understood the terms and conditions given to me and agree to comply with them fully.
- ☐ My child does not have any food allergies and I give permission for him/her to be given any food you deem suitable.
- ☐ I give permission for my child's photograph to be used on Social Media.
- ☐ I give permission for my child's photograph to be used for promotional purposes.
- ☐ I give permission for the tutor to seek medical advice or provide treatment in an emergency
- ☐ I agree for my email address to be used to inform me of other classes and services. I understand that I will be able to unsubscribe at any time. *(Your email address will not be passed to any third parties)*

Privacy policy

All the personal information collected on this booking form is requested to operate the agreement between you and us. It will not be passed on to any third party and will be deleted when your child is no longer attending our classes.

OR

My child has an allergy to the food(s) / drink(s) as stated below and must not be given this under any circumstances.

Details.....
.....
.....

****Does your child have any special educational needs or disabilities which may affect their learning? YES / NO**
(please delete as applicable) If you have answered yes, the teacher will request additional information from you in order to maximise your child's learning experience.

La Jolie Ronde does not discriminate on any grounds when accepting children into language classes.**

I have received, read and understood the terms and conditions set out above and agree to comply with them fully.

NAME OF PARENT/GUARDIAN

ADDRESS.....
.....

TEL. NO

E-MAIL

Signed.....Date:.....

CHILD'S NAME:.....