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Breakfast and After School Club Registration Form



Child's details

Date of registration:

First name	Surname	What s/he likes to be called
Date of birth and current age:	First language:	Tick if EYFS child:

Parent/Guardian details:

Title	First name	Surname	Title	First name	Surname
Home address			Home address		
Does this child normally live at this address Yes/No			Does this child normally live at this address Yes/No		
Home number	Mobile number	Work number	Home number	Mobile number	Work number
Does this personal have parental responsibility? Yes/No			Does this personal have parental responsibility? Yes/No		
Does anyone else have parental responsibility? (if yes please provide details on a separate sheet)					



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Emergency Contact Details: (please provide details of two people we can contact if we are unable to get hold of you)

Name	Telephone number	Mobile number
Address		Relationship to child
Name	Telephone number	Mobile number
Address		Relationship to child

People authorised to collect your child: (Person must be over 16 years old)

Name	Telephone number	Mobile number
Address		Relationship to child
Name	Telephone number	Mobile number
Address		Relationship to child

Child's Doctor:

Name	Telephone number
Address	



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About your child:

Please detail any additional/Special needs your child has: (please provide full details)

Please detail any dietary requirements/food allergies for your child: (please provide full details and complete the medical, permission to administer medicine and allergy management plan forms)

What are your child's favourite activities?



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PARENT/CARER'S CONTRACT

Child's name:

Class:

Parent or carer's name:

- I consent for my child to attend the extended services care. I understand that the team has policies and procedures and that there are expectations and obligations relating to the club, myself and my child and I agree to abide by them.
- I understand that both the Breakfast and After School Club is a play care facility and that whilst my child is there the team are legally responsible for him/her
- My child will be provided with a snack and a drink whilst at the club, unless otherwise requested
- My child will be given stimulating and challenging play opportunities in a fun and safe environment
- Once my child is in the extended provision, s/he will be in the care of the team until collected and signed out by a named, responsible adult or a young person over the age of 16
- I will book and pay in advance for any session that my child attends. Once booked, if my child does not attend for any reason, I accept I will still be charged for this place. If I wish to cancel my place I will inform the school office in writing at least one week before.
- I understand that it is my responsibility to keep the staff team informed of any alterations to the information regarding my child.
- I accept that whilst attending the After School Club, my child may take part in messy activities
- After School Club closes at 5:50pm. I will inform the team if I am going to be late using the school mobile phone. If my child is not collected by 6:00pm I will pay a charge of £10 per additional quarter of an hour.
- I understand that if any child remains at 6:30pm, after doing everything possible to contact parents and emergency contacts, the After School Playleader will be legally required to contact Social Services
- Should there be any incidents at After School Club involving my child I will be informed of the situation.
- If my child has an accident then he/she will be treated by a qualified First Aider and I will be informed of the situation as soon as possible. If there is a situation where my child needs urgent medical treatment and I am unavailable, a member of staff from After School Club may sign any consent forms necessary for treatment on my behalf

I have read and understood the above terms and conditions and I agree to abide by them

Signature:

Date:



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ALL ABOUT ME!

This is me! (include photograph)

Here you can see that I am....

What do you like doing?

At home:

In school:



Interesting facts about me...



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Please indicate the sessions that you will be looking to book, when the provision opens.

Name of child:

Year group:

I would like to book my child into BREAKFAST CLUB on:

Monday Tuesday Wednesday Thursday Friday

I would like to book my child into AFTER SCHOOL CLUB on:

Monday Tuesday Wednesday Thursday Friday

Payment details:

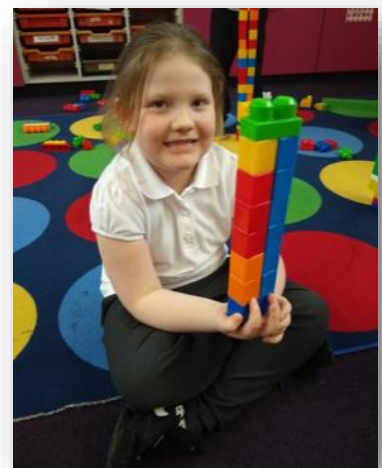
I enclose the full payment of £ _____

I have a standing order arranged for all payment

I will be paying by direct debit and have arranged this with the schools Director of Operations

I will be paying using the childcare voucher system

*Please name childcare voucher provider _____





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Our Breakfast Club team

Play Leader	Mrs Courtnell	
Play Worker	Mrs Kennard	

Our After School Club team

Play Leader	Mrs Belaidi	
Play Leader	Miss Carole Chevannes	
Play Worker	Miss Falvo	
Play Worker	Ms Debra Fryer	
ASC cook	Mrs Vimala Mohanarasa	



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