

Little Adults After School Club

PLEASE PRINT: ALL CONTACT DETAILS MUST BE COMPLETED

NAME OF SCHOOL.....TIME SCHOOL ENDS.....

NAME OF CHILD..... D.O.B.....

CHILD'S ADDRESS.....

.....

RELIGION.....CHILD'S ETHNIC ORIGIN.....

CLASS NAME AND TEACHER'S NAME.....

PARENTS/GUARDIAN'S NAME.....

ADDRESS.....

TELE CONTACT NO. DURING CLUB HOURS.....

EMERGENCY TELEPHONE NUMBERS FOR OTHER NOMINATED PERSONS:

NOMINEE 1.....RELATIONSHIP.....

ADDRESS.....

HOME TELE NO..... WORK TELE.....

NOMINEE 2..... RELATIONSHIP.....

ADDRESS.....

HOME TELE NO.....WORK TELE.....

Please tick the days He/ She is contracted to attend

Monday	Tuesday	Wednesday	Thursday	Friday
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NAME AND ADDRESS OF PERSON COLLECTING CHILD IF DIFFERENT

NAME.....

ADDRESS.....

.....TELE.....

Does your child have special needs? Yes / No

Does your Child receive one to one care at school? Yes / No

If you have ticked yes to either or both questions above, please note that once we are able to confirm a place for your child; the fees will need to be discussed with the manager.

Court order details if any (Residence Order, Contact Order, Care Order, Injunctions etc)

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Detail of child subject to child protection or care plan.....

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State any special medical or diet consideration.....

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Does your child have any known allergies or major dislikes e.g. certain food or materials

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CHILD'S DOCTOR'S NAME.....ADDRESS.....

.....TELE.....

Do you give consent for your child to be seen by a doctor in an emergency Yes No

Has your child been actively sensitive to penicillin Yes No

All agreed sessions must be paid for, whether the child attends or not, including holidays taken during term time, teachers training days, and other religious holidays taken during term time. The only exemption of payment is when the child has an infectious disease, such as chickenpox, measles, or if he/she is admitted to hospital.

The After School Club will run in conjunction with school terms and vacations, opening with the first school and closing with the last school.

Please feel free to add any relevant details or information below:

I agree that the After School Club fees will be paid in conjunction with the school term period.

DO YOU WHICH TO RECEIVE THE CLUB POLICY ONLINE

EMAIL BOX

SIGNED.....DATE.....