

Broadhempston Village Primary School

After School and Breakfast Club Registration



**Child’s Details**

First Name …………………………………………………. Surname ……………………………………………………………………………..

Date of Birth and Current Age …………………………………………………………………………………………………………………….

Current Class ………………………………………………………………………………………………………………………………………………

**Parents / Guardian / Carers Details**

Title …………………… First Name …………………………………… Surname …………………………………………………………….

Relationship to Child ………………………………………………………………………………………………………………………………….

Home Address …………………………………………………………………………………………………………………………………………..

Work Address ……………………………………………………………………………………………………………………………………………

Home Number ……………………………… Mobile ……………………………… Work ……………………………………………………

Email Address ……………………………………………………………………………………………………………………………………………

**Parents / Guardian / Carers Details**

Title …………………… First Name …………………………………… Surname ……………………………………………………………

Relationship to Child …………………………………………………………………………………………………………………………………

Home Address ………………………………………………………………………………………………………………………………………….

Work Address …………………………………………………………………………………………………………………………………………..

Home Number ……………………………… Mobile ……………………………… Work ………………………………………………….

Email Address ………………………………………………………………………………………………………………………………………….

**About your Child**

Please provide any additional / special / medical needs your child has (please provide full details, if medication is needed an additional medication form will need to be completed)

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**Name and address of Doctor** ………………………………………………………………………………………………………………………

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**Details of any allergies your child has (please provide full details) ……..**………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

**Please provide details of any dietary requirements for your child (please provide full details)**

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**Any Additional Information** ………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

I consent for my child to attend this club. I understand that the club has policies and procedures and that there are expectations and obligations relating to both the club and myself and my child and agree to abide by them.

I give permission for a trained member of staff to administer appropriate first aid if required.

I give permission for Broadhempston Primary School After School Club to seek any necessary emergency medical advice or treatment in the event that my child is involved in a serious accident. I expect to be contacted immediately on the above telephone numbers.

I confirm that the information given on all forms is correct and agree to notify the club staff of any changes in detail.

Late collection of my child may result in a charge of £5.00. I understand that persistent late or non-payment of fees may jeopardise my child’s continued place. In an emergency I will ring the school.

I understand that the information given on this registration form is confidential.

I understand that all the school’s policies will apply to Broadhempston Village Primary School after School Club, including Child Protection and Data Protection.

I have read and accepted the above conditions for my child attending Broadhempston Village Primary School After School Club

**Signature of Parent / Carer / Guardian** …………………………………………………………………………………

**Date** ………………………………………………………………………………………………………………………………………