

The Larks & Nightingales Registration Form Academic Year 2023/24



Child's Full Name:
Home Address:
Date of Birth:
Year Group in September 2023:

Name to be Used:
Post Code:

Start Date:

Please tick the sessions that you would like your child to attend.

	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast					
After School					

Please provide details of all persons who have parental responsibility:

Parent/Carer 1:	Home Address:	Work Address:
	Tel: Mobile: Email:	Tel: Mobile:
Parent/Carer 2:	Home Address:	Work Address:
	Tel: Mobile: Email:	Tel: Mobile:

We only request your work details to give us the best possible chance of contacting you should an emergency arise.

Emergency Contact Details: (This must be different to the contact details above. This can be a family member, neighbour or friend).

Name:	Address:	Contact Numbers:	Relationship to Child:
		Tel: Mobile:	

Please provide the names and contact details of up to 5 people authorised to collect your child. Only persons named on the form will be permitted to collect your child. This list can be updated throughout the year:

1.	Name	
	Telephone Number	
	Relationship to Child	
2.	Name	
	Telephone Number	
	Relationship to Child	
3.	Name	
	Telephone Number	
	Relationship to Child	
4.	Name	



	Telephone Number	
	Relationship to Child	
5.	Name	
	Telephone Number	
	Relationship to Child	



Payment of Fees: (Please tick your preferred method).

Cash	
Online Banking	
Childcare Voucher Company Name e.g. Edenred	

Any useful information about your child e.g. likes, dislikes, interests, hobbies:

Specific Information to help us to support your child:

Does your child have any specific requirements e.g. sight, hearing, dietary, special educational needs?

Please describe any support requirements related to the health issues stated above e.g. one to one required?

If your child has a hearing/speech impairment, please tell us how they like to be communicated with e.g. lip reading, BSL?

Children with additional needs

Our Club recognises that some children have additional needs or physical disabilities that require support and assistance. We will assess the individual needs of each child in consultation with their parents prior to them attending the Club and will make reasonable adjustments to ensure that children can access our services and are made to feel welcome. Where one-to-one support is required, we will assist parents in accessing the funding required to provide the additional care.

Please tick here to request a meeting regarding specific care for your child.	
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Admissions

New starters will now join us on a 6 week probation period. During this time, we will monitor behaviour, payment of fees and collection times.

Late Collection from After School Club

Children MUST be collected by our closing time. We cannot guarantee the availability of staff after this time. This may mean that you need to think ahead and contact a person named on your authorised collection list to collect your child. You must text or call us to confirm if this is the case. Late collection will result in a £10 fine, to be paid within 48hrs, regardless of being 2 minutes late or 10 minutes late. Three late occasions will result in the immediate termination of your child's place. None payment of the fine will also result in immediate termination of your child's place. The place will then be allocated to a child on our waiting list. You will be able to reapply at the start of the following academic year (September).

Data Protection

Your child's information is kept in a locked cupboard on the premises that can only be accessed by staff.

There are only two reasons why we may need to share this personal information:

1. If your child needs emergency treatment
2. In the interests of Social Services

All information is stored in line with GDPR regulations.



Emergency Medical Treatment:

Medical Practice	Address	Telephone number

Any relevant medical information: (Is your child on any form of medication? If so, what type and for what condition?)

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Parent to be Priority Contact in an Emergency:

Name:	Telephone Number:

In the event that my child is involved in a serious incident while at the club, I expect the manager, or delegated member of staff, to contact me immediately on the above emergency telephone number.

In the event that my child requires immediate medical treatment before I will be able to get to the hospital, I authorise the Manager, or delegated member of staff, to consent to emergency medical treatment on my behalf. I understand that this authorisation will remain valid unless I contact the manager to withdraw it.

Please sign to confirm that you agree to the above Emergency Medical Treatment procedures. Both Parents MUST sign below:

Signature of Parent/Carer: _____ Date: _____

Signature of Parent/Carer: _____ Date: _____

Consent Forms: (Please delete as appropriate)

Plasters – I do/do not give permission for a member of staff to supply hypoallergenic plasters to my child.

Sun Cream – I do/do not give permission for a member of staff to apply sun cream to my child in sunny conditions. In sunny weather my child will be sent with named sun cream and a hat. If your child does not have sun cream we are able to supply Nivea Sun Spray, factor 30, non-greasy, UVA and UVB protection (or similar).

Photographs – I do/do not give permission for my child to have photographs taken for display or portfolio purposes.

Mobile Phones – I understand that if my child is in possession of a mobile phone it must remain in their school bag/coat pocket during the session at The Larks & Nightingales.

Personal Possessions – The Larks & Nightingales are not liable for any damage that may occur to your child's personal possessions. We prefer any technology to be left at home.

Signature of Parent/Carer:		Date:	
Signature of Parent/Carer:		Date:	
Signature of Manager:		Date:	

Both parents to sign above.