

The Learning Ladder After School Club



Registration Form

Date form completed:	
Child's full name:	
Name child likes to be called:	
Child's date of birth:	Child's age:
School attended:	Year group:
Child's home address:	
Postcode:	
Parent/carer 1	Parent/carer 2
Name:	Name:
Address:	Address:
Postcode:	Postcode:
Email address:	Email address:
Home phone:	Home phone:
Mobile phone:	Mobile phone:
Work phone:	Work phone:
Please state the person(s) that have <u>legal</u> parental responsibility for your child:	
1.	
2.	

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Emergency contact (where possible this should be somebody other than the child's parents)	
Name:	Relationship to the child:
Address:	
Home phone:	Mobile phone:
Names of people who have permission to collect your child:	
1.	
2.	
3.	
4.	
5.	
6.	
<p>(Please note- any person on this list can collect your child on a day to day basis with no other notification. Where you require somebody not on the list to collect your child you will need to inform the club of this prior to collection. Where this is the case we will put in place extra security measures such as asking the child to identify the person collecting/using a password. We will not allow a child to be collected by a person not listed without prior permission from the parent/carer directly.</p>	
Child's doctor	
Name:	
Address:	
Postcode:	
Phone Number:	



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Does your child have any medical conditions we need to be aware of?
(If so please give details)

What is your child's home/spoken language:

Does your child observe any cultural or religious practices which we need to be aware of?

(If so please give details)

Does your child have any dietary requirements?

(If so please give details)

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Is there any additional information you consider important and that we should be aware of?

(If so please give details)

Terms and conditions

I have read the clubs information booklet and I agree to abide by the clubs policies and procedures including the payment terms.

By submitting this completed and signed registration form, I understand that I am booking a permanent place for my child and will need to provide 4 weeks written notice to terminate the place, during which time full fees apply (breakfast and after school club only).

Please sign to agree to the above terms and conditions

Sign:

Date:



Permissions

We would like to ask your consent for the following, please sign if you are happy:

For photographs to be taken of your child for display purposes and website/social media

Sign: Date:

For your child to watch a DVD/Video for a short set period of time per week

Sign: Date:

For your child to be taken off site by staff members to visit the shop/park/other local amenities (please note bigger organised trips will require additional permission)

Sign: Date:

For suitably qualified staff to administer first aid to your child whilst at the club

Sign: Date:

For any necessary emergency medical advice or treatment to be sought for your child whilst at the club

Sign: Date:

For staff to use face paint on your child

Sign: Date:

For us to apply the clubs sun cream on your child where necessary

Sign: Date: