All My Friends Out of School Clubs

Registration Form

Child's Full Name			
Known As			
Date of Birth		Ethnicity	
Gender at birth		First Language	
Gender Identity		Pronouns	
Password for collection		School Attended	

Bill Payer Details

Title: Name:

Address:

Home Tel:

Mobile No:

Email:

Payment Details (Mark all that apply)

BACS

Tax Free Childcare

Voucher: State company

Primary Contact

Parental Responsibility yes/no

Title:

Forename:

Surname:

Address (If different from child)

Postcode:

Critical worker yes/no

Authorised Pick Up yes/no

Emergency Contact yes/no

Relationship to child:

Home Tel:

Place of work:

Work Tel:

Mobile No:

Email:

Contact 2 Parental Responsibility yes/no Authorised Pick Up yes/no

Title: Emergency Contact yes/no

Forename: Relationship to child:

Surname: Home Tel:

Address (If different from child) Place of work:

Work Tel:

Mobile No:

Postcode: Email:

Critical worker yes/no

Contact 3 Parental Responsibility yes/no Authorised Pick Up yes/no

Title: Emergency Contact yes/no

Forename: Relationship to child:

Surname: Home Tel:

Address Place of work:

Work Tel:

Mobile No:

Postcode: Email:

Other Info:

Doctor's Details

Surgery Name:

GP Name:

Address:

Tel No:

Dentist Details

Surgery Name:

Address:

Tel No:

Other professionals involved with care: (Include Social Workers)

Details of any SEND	
Details of immunisations	
Details of any allergies	
Details of any currently prescribed medication	
Family religious/cultural background	
Any specific dietary requirements**	

**** Unless otherwise directed your child may be fed food that has been marked as "May contain traces of nuts".**

Permissions

- For a member of Out of School Club staff to sign any written form of consent required by the Hospital Authorities if the delay in getting a parental signature is considered by the doctor to endanger your child's health or safety. Yes/No
- To use non-allergenic plasters. Yes/No
- To take your child on spontaneous and routine outings from the club e.g. to the local park. Yes/No
- Nail painting Yes/No
- Face painting Yes/No
- Temporary tattoos Yes/No
- Xbox / Wii games (age appropriate) Yes/No
- To display photographs of your child in the club scrap books Yes/No
- Photographs of your child can be used on All My Friends social media Yes/No
- Photographs of your child can be used on All My Friends Website Yes/No
- Photographs of your child can be used for advertising materials Yes/No

*Children's photos will still be used once your child has left the setting unless you withdraw consent.

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I sign to confirm that all the above information is accurate to the best of my knowledge and agree to inform the Club if any details change.

Name of Parent/Carer:

Signature: Date: