

Schools Out at St Teresa's Primary School

Registration Form

Please complete the form using CAPITAL LETTERS. If you need additional space please provide on a separate sheet of paper. Once this form is completed and handed in you must inform us of any changes **immediately**.

CHILD 1 NAME:			CHILD 2 NAME:				
DOB:		Gender:		DOB:		Gender:	
Name of parents with parental responsibility on birth certificate:			Name of parents with parental responsibility on birth certificate:				
Nationality		Religion		Nationality Religion		Religion	
Current School				Current School			
School class wher	n enrolled:			School class when enrolled:			
CONTACT DE	TAILS:						
Home address							
				Post Code			
Home telephone							
Parent or Guardia	n's addresses (pleas	e include address	& contact details c	f parents not living	g with child)		
PARENT 1 CO	NTACT DETAI	LS		PARENT 2 C	PARENT 2 CONTACT DETAILS		
Mobile:				Mobile:			
Place of work/Number:				Place of work/Number:			
Name:				Name:			
Email:				Email:			
Signature:				Signature:			
Childs Doctor				Surgery:			
Does your child suffer from any of the following (please tick):							
Asthma	Allergies	Hayfever	Seizures	Eczema	Other:		
Please give deta	ils:						
Are there any physical or health conditions that your child suffers from:							
Please give deta	ils: (add separate	sheet if needed)).				
Does your child have additional needs/disabilities							
Please give details:							
Does your child have any dietary/cultural /religious requirements?							

COLLECTIONS:

Please give the names of at least two other adults (18+) that are given permission to collect from the setting with contact numbers:				
Name:	Mob:	Relationship:		
Name:	Mob:	Relationship:		
Name:	Mob:	Relationship:		

Please indicate the sessions you wish your child to attend:				
BREAKFAST CLUB	AFTER SCHOOL CLUB			
Monday	Monday			
Tuesday	Tuesday			
Wednesday	Wednesday			
Thursday	Thursday			
Friday	Friday			

Please read the following **carefully** and \checkmark **tick** which you agree with then sign and print where indicated.

	I have read and understood the Schools Out Prospectus and Summary of Policies.			I give permission for my child(s) to be included on trips and local outings to (for example the park or ice cream parlour) organised by Schools Out in term time and holiday club. Other		
	I agree that Schools Out reserve the right to remove my child to the nearest hospital or seek advice from outside agencies, in the event of an accident, sudden illness or deterioration in a child's well being. Parents or guardians will always be informed as soon as possible.			organised trips, requiring transport and separate consent, will be requested.		
				I give permission for my child(s) to watch U or PG rated films whilst in your care. I understand this will happen rarely and that all films are vetted by staff beforehand.		
	I agree to give permission for photographs to be used within the school and for record of achievements etc.					
	I agree for above photographs to to help promote the setting.	be used on our Facebook page				
Signed	:		Print N	Jame:		
	M	We would like to protec	t you	r child from sunburn & skin damage.		
5		We provide 'legionnaire' style hats and baseball caps, we also encourage the children to play in the shade between 11am and 3pm. With your consent we can help your child when necessary. Please tick as appropriate:				
2		I give permission to Schools Out staff to apply sunscreen				
		I would like to provide a bottle of sunscreen (which I will label with my child's name) for use at club				
	-	Signed:				

Print Name:

GDPR statement

We collect this data for the purpose of registering your child at our setting we collect this data to meet the legal requirements of the Early Years Foundation Stage. It will be shared with the Child's Key Person and relevant staff within the setting and, if necessary, those listed in the Privacy Statement. This registration form will be kept securely in a locked filing cabinet at the setting and will be kept for 3 years after your child leaves or until our next Ofsted inspection. **Please note** if you would like to exercise any of your data rights as listed in the Privacy statement please contact us. If you continue to have concerns about the way your data is handled, you have the right to contact the Information Commissioners Office (ICO) – Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF or ico.org.uk/