



## REGISTRATION FORM

<b>Child's Details</b>			
Full Name	<input type="text"/>	D.O.B	<input type="text"/>
Sex	Male <input type="checkbox"/> Female <input type="checkbox"/>		
<b>Parent/Guardian Details 1</b>			
Relationship to child	<input type="text"/>		<input type="text"/>
<input type="text"/>	First name	<input type="text"/>	Surname <input type="text"/>
Address	<input type="text"/>		
E-mail	<input type="text"/>		
Telephone number	<input type="text"/>	Mobile number	<input type="text"/>
Place of work	<input type="text"/>	Telephone number	<input type="text"/>
<b>Parent/Guardian Details 2</b>			
Relationship to child	<input type="text"/>		
Title <input type="text"/>	First name	<input type="text"/>	Surname <input type="text"/>
Address	<input type="text"/>		
E-mail	<input type="text"/>		
Telephone number	<input type="text"/>	Mobile number	<input type="text"/>
Place of work	<input type="text"/>	Telephone number	<input type="text"/>
Who has legal parental responsibility for the above named child. Please print all names.			
<input type="text"/>			
State and dietary requirements (allergies and religious requirements)			
<input type="text"/>			
<b>Medical Information</b>			
Name of doctor	<input type="text"/>		
Address	<input type="text"/>		
Telephone number	<input type="text"/>		
Allergies	<input type="text"/>		
Medical conditions	<input type="text"/>		

**Additional Emergency contact**

Title  First name  Surname

Address

E-mail

Telephone number  Mobile number

Relationship to child  Verbal password

Name of School Attending:

Class and Year Group

Start Date

Please Tick	Monday	Tuesday	Wednesday	Thursday	Friday
Before School					
After-School					

Is there any additional information you would like to share with us about your child.

I/we confirm that I/we have disclosed relevant details/information to Beanstalks regarding my/our child, and will take full responsibility to inform them of any changes as and when they arise.

I/we have read and understood the Terms and Conditions of Beanstalks, which are found in the registration pack on the website.

I/We the signed have legal parental responsibility for the above named child.

Signed  Date

Signed  Date



## PARENTAL CONSENT FROM

Child's name

In order for us to provide the best possible care for your child and to comply with your wishes, we require you to complete the form below. Please tick all boxes that apply and then sign at the bottom.

### Child Protection

We have a duty to report any child protection or concerns regarding the possible abuse of a child in our care to both Ofsted and the Duty Officer at the Local Social Services Department.

I/We understand that any concerns regarding our child and possible abuse will be reported.

### Outings

At Holiday Club, we take the children on regular outings in the local area in order for them to learn about their community and environment. If we are planning on a trip further a field then we will inform you and ask for permission.

I/We give permission for our child to be taken on regular local outings.

**Transport** - Sometimes on outings we use public transport or organise a coach.

I/We give permission for our child to go on public transport and in correctly organised private transport organised by the setting.

**Emergency Medical Treatment** *In the event of an emergency we will contact parents as soon as possible, however they may not be contactable or unable to get to the setting quickly enough for the nature of the incident. In these situations we request permission to seek emergency medical treatment for your child.*

I/We give permission for the setting seek emergency medical treatment on behalf of my child.

### Face Painting

I/We give permission for our child to have their face painted.

### Sun Cream

I/we give permission for our child to have sun cream applied to them when appropriate.

**Large Play Equipment** - Sometimes we use local parks and visit ball parks and adventure parks to support the children's developing physical skills.

I/We give permission for our child to play on large play equipment.

### Photographs

Whilst your child is in Beanstalks we will be taking photographs for a variety of different purposes. Please indicate which of the following you give your consent to.

Child's development records and profile

Club display boards

Club promotional literature

Club website

Staff/students' course work for qualifications

Press releases

Parent/Carer Signature (with legal parental responsibility for the above named child)

## TERMS AND CONDITIONS

### **Registrations**

Registration forms must be completed and returned before a child can be offered a place in the club

### **Cancellations**

Beanstalks require one months notice in writing to cancel or postpone a place in Breakfast or After-school club.

### **Collection / Drop Offs**

Parents must sign their child in and out of the club. For the safety of children and staff, we request your children are collected promptly before closing time.

Beanstalks will accept no responsibility for injury, damage or loss to persons, vehicles or property.

If children are not collected on time, the management reserve the right to implement our non collection policy.

Charges of £10 per 15 mins will be incurred after the closing time.

### **Absence**

Please advise before 2pm if your child is not attending a pre-booked after school session, to avoid concerns over missing children.

### **Fees**

All fees are payable half-termly in advance. A late payment of £2.00 per day will be charge on overdue fees. In the event of the fees remaining outstanding for 2 weeks, you will receive notice of your child's place being withdrawn.

Direct Debit / Voucher payments will be considered on a monthly basis at the discretion of the directors. Beanstalks reserve the right to increase fees.

### **Personal Belongings**

Beanstalks will not accept any responsibility for any loss or damage which may occur.

### **Safeguarding Children**

In cases of suspected sexual abuse of children, it is our duty and a legal requirement to report our concerns to social services.

### **Security**

Children will only be released into the care of named contacts on the registration form.

### **Sharing Information**

We work in a multi-agency environment. If we need to seek advice from professionals, or are asked to share information about your child, we will contact you directly to seek informed written consent.

### **Child records**

Beanstalks will hold information on your child, such as medical, dietary and special requirements.

### **Medicine / Illness**

Beanstalks will administer prescribed medicines only. The Medicine book must be completed and signed by the parent / carer.

Parents are requested not to send their child to beanstalks if they are suffering from any communicable diseases. No fee refunds are given due to sickness.

### **Emergency Closure**

Should Beanstalks not open due to unforeseen school closure during term-time, we are unable to offer any refund to fees.