



**Shirley Community Nursery & Primary School
AFTER SCHOOL CLUB REGISTRATION FORM
01223 712252**

The General Data Protection Regulation and the Data Protection Act protect this strictly confidential information, stored on the school's student records database. This information will be used to inform the child's medical and emergency contact records. The information may be shared with other agencies, as indicated in our Privacy Notices, available from the school website www.shirley.cambs.sch.uk.

Child's first name:	Child's middle name(s) :	
Child's legal Surname :		
Child's preferred name (if different from above) :		
Child's date of birth:	Child's gender :	
Current Home Address :		
Postcode :	First Language :	Email Address :

Medical Information	
Family Doctor, name & address :	
Has your child any Medical Conditions or allergies, please list below: Yes/No	Has your child any dietary requirements, please list below : Yes/No

Contact Information			
Please list all adults who have legal responsibility of your child :			
Please list those people who will collect your child and/or should be contacted in an emergency AND THE ORDER IN WHICH WE WOULD CONTACT THEM			
	Name/address	Relationship to child	Contact Numbers
1 st Person with parental responsibility			
2 nd Person with parental responsibility			

Permissions

Taking a photograph of your child <i>For use of named photographs of children who attend ASCC in ASCC leaflets, events, noticeboards, advertising, the schools website etc.</i>	Yes/No
Application of suncream <i>Parents to provide named sun cream and hat or cap</i>	Yes/No
Medical intervention (first aid) e.g. bumps & grazes <i>Medical intervention will only be given by certificated first aiders..</i>	Yes/No
External Emergency medical assistance e.g. assistance from the local doctors surgery or ambulance. <i>In an emergency, trained staff act as 'first contact' until main carer arrives.</i>	Yes/No
Short trips out <i>A short walk to the local park or local area of interest, no more than for 45 minutes at any one time. Prior notice of any walks will be given and a separate permission slip will be signed by the first main carer.</i>	Yes/No

Agreement

I agree to the permissions above that I have given a 'yes' answer to, when my child attends After School Care Club.

Signed **Date** **First main carer**

- I give consent for my child to attend After School Care Club.
- I give permission for any information about my child (if in Early Years) to be passed on to the class teacher.
- I understand that this Club has policies and procedures and that there are expectations and obligations relating to both the Club and myself and agree to abide by them.
- I understand that all staff have a duty of care to safeguard and promote the welfare of the children who attend the Club.
- I understand that non-payment of fees will affect my child's ability to attend the Club.
- I understand that when arrears of fees reach £10, my child may not attend the Club until I have paid the outstanding fees. I understand the Club's staff will inform me when I owe payment.
- I confirm that the information given on all forms is correct and accurate and agree to notify the Club's workers of any changes in details.

Signed : **Date** **First main carer**

Shirley Community Nursery Primary School is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment. All staff are required to have an enhanced DBS check.

My child likes:
e.g. play activities, reading – whatever your child likes doing in their free time!