

**Alconbury Before & After School Club Pupil Registration Form**

**PUPIL PERSONAL INFORMATION**

<b>SURNAME:</b>		<b>FORENAME</b>	
<b>HOME ADDRESS:</b>			
<b>POST CODE:</b>		<b>TELEPHONE:</b>	

**MOTHER/CARER INFORMATION**

<b>TITLE:</b>		<b>FORENAME:</b>		<b>SURNAME:</b>	
<b>PHONE: Club time Mobile Home Work</b>	1.				
	2.				
	3.				
	4.				

**FATHER/CARER INFORMATION**

<b>TITLE:</b>		<b>FORENAME:</b>		<b>SURNAME:</b>	
<b>PHONE: Club time Mobile Home Work</b>	1.				
	2.				
	3.				
	4.				

**DIETARY INFORMATION**

**Allergies / Veg**

**Please specify further detailed information if you have ticked any of the above or would like to add any other relevant information:**

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**MEDICAL INFORMATION**

Is there a current Health Care Plan in school? Yes/No

<b>DOCTOR'S PRACTICE &amp; phone number:</b>		<b>MEDICAL CONDITIONS:</b>	
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**NOMINATED INDIVIDUALS AUTHORISED TO COLLECT YOUR CHILD**

Please provide on the list below the full names of all individuals authorised to collect your child from our Before & After School Club, including parents and carers. If you wish anyone else to collect your child you will need to arrange a password with Alconberries' Staff.

	Name	Relationship to the child	Phone number
1			
2			
3			
4			
5			
6			