Child's Birth Certificate:

Date seen:

Verified by (Staff name):



About your child – Please complete this 3-page form in its entirety Child's first name: Last name: Age: Date of Birth:/...../ Name of School: Class: Nationality: First Language: Religion: Religion: You are required to produce your child's birth certificate before their first day at Superkids. **About the primary carer** Title: Full name of main Parent or Carer: Mobile No: Do you have parental responsibility? Yes / No Work No: Home Tel. No: Home Address: Postcode: Local Authority: Email: Is this child the subject of a court order? **Yes / No** (If Yes, please provide a copy of the Order) Your child's emergency contact First Alternative Emergency contact: Does this person have parental responsibility? Yes / No Name: Relationship to child: If no: Postcode: Second Alternative Emergency contact: Does this person have parental responsibility? Yes / No Name: Relationship to child: If no: Postcode: Attendance and collections **Collection:** Please state who will be collecting your child **Attendance:** Please circle sessions required: Main Carer: Yes / No **Breakfast Club:** Emergency contact #1: Yes / No Monday Tuesday Wednesday Thursday Friday Emergency contact #2: Yes / No Other: **After School Club:** First Name: Last Name: Monday Tuesday Wednesday Thursday Friday Tel. No: Start Date: Relationship to child:

Photograph consent

Superkids would like to include photographs of children participating in all types of activities at Breakfast, After School and Holiday Playscheme club. These photos would be used for; Your child's one-page profile, internal display boards and notice boards, communication book and club photo book. Please note: No photo's will be published on our website or used for publicity purposes without your expressed consent.

<u>Parent / Carer Consent</u>: I have read and understood the conditions under which photos of my child may be used. I have noted that I can withdraw my consent in writing at any time. **Please <u>delete as appropriate</u> and sign**

I **do / do not** consent for Superkids to include photos of my child as outlined above

Signature of parer	nt or guardian:	Date:

Medical, allergy and dietary

Medical Details: Does your child have any medical conditions and/or additional needs? Yes / No (This information is essential in order for us to provide the correct support for your child).
If YES, please give details
Does your child have a health care plan? Yes / No Is your child taking any medication? Yes / No (If yes, please complete a medication form) Does your child have any known allergies or special dietary requirements? Yes / No Please give details.
Name of GP:

Parental consent

Please <u>delete</u> as appropriate

I do / do not consent for my child to be given **First Aid treatment** or taken to hospital in an emergency.

I do / do not consent to a member of staff at Superkids **applying sun cream** to my child in hot conditions if he/she is unable to do it for themselves. (Note: Sun cream must be supplied by the parent/guardian).

I do / do not consent to receiving **Holiday Playscheme information.**

Declaration

- I hereby consent for my child to take up a place at this setting, according to the terms and conditions and its policies and procedures. I have understood that places are allocated on a first come first served basis on receipt of this Registration form. I understand the expectations and obligations relating to both myself and the setting, and agree to abide by them.
- I confirm that the information given above is correct and I promise to contact the manager in writing as soon as any of the details change.
- I agree that my child will conduct themselves according to the standards of behaviour set out by Superkids and will abide by safety instructions given by staff.
- I understand that Superkids has a duty of care, and may discuss my child's development with the School or other Professional Agencies to ensure my child's needs are fully supported.
- I understand that persistent late or non-payment of fees or late collection of my child will jeopardise my child's continued attendance at the setting.
- I understand that all pre-booked or set days remain payable during any type of absence and sickness
- I will provide 4 weeks' notice in writing to terminate my child's place at Superkids
- I agree to pay <u>two weeks deposit</u> with this application. If places are not available, I understand my child will be added to the waiting list and Superkids will contact me when a place becomes available.

Signature of parent or	guardian:	Date:



Walking Bus Consent Form

Dear Parent / Carer,				
I confirm that: (Child's Name)will attend Superkids Out of School Club and use the walking bus.				
I hereby consent to Superkids Staff taking my child to school and/or collecting my child from school on notified days. I consent to my child using the Walking Bus under the supervision of Superkids staff. Sign:	Childs promise I promise to: ✓ Behave sensibly ✓ Listen carefully and follow instructions ✓ Walk with a partner and not pushing the person in front or lag behind ✓ Not run in or on the road ✓ Not to cross the road until Superkids staff say it is safe to cross			
Date:	Child signs:			

Notification of your Child's Preferences

Please take this opportunity to let Superkids know your child's likes. Superkids will endeavour to meet preferences wherever possible whilst ensuring that children are offered nutritious and varied foods as stated in our Prospectus.

Breakfast:	Afternoon snacks:			
(including milk: full fat / semi skimmed / soya)	(e.g. fruit, vegetables, sandwich filling)			
I like	I like			
I dislike	I dislike			
Play activities: (indoor and outdoor games and activities)				
I like	I dislike			