Appendix 1

Breakfast and After School Club Registration Form

Childs Name:

Child Class:

Date of Birth:

Please provide any information below

Dietary Requirements	
Allergies	
Medical Information	

Please give the information below for the Parents/Carers and any other individuals authorised to collect your child from After-school Club. Please note that if other individuals are listed, the school must have their consent to hold their information. Please contact us for a form, if one has not already been completed.

Name	**Relationship**	**Home Telephone**	**Mobile Number**	**GDPR Consent already given? Y/N**

Form Completed By:

Print Name: ……

Signature: ……...

Date: ……