



The Annex Before and After School Club

Child's Details

Child's Full Name	School	Date of Birth	Year Group
	St Thomas More		

Address

Home Phone:	Postcode

Parent/Carer's Details

Full Name	Relationship to child	Day time/work phone

Emergency Contacts (in the event that the parents/carers cannot be contacted)

Full Name	Relationship to the child	Phone
1.		
Address		
2.		
Address		

Medical Details

Doctor's Name	Surgery	Phone Number

Personal Information

Please give details of any allergies, diabetes, migraine, asthma, epilepsy or any illness or disability?

Additional Consents:

Please tick the consents you agree to:

I give consent for the use of sun protection cream to be applied in sunny weather	
I give consent for my child to take part in short outings within walking distance of the scheme, for instance to the local park or library. I understand they will be accompanied at all times.	
I give consent for my child to participate in sporting activities such as tennis, badminton and football etc. Whilst supervised appropriately.	
I give consent for my child to partake in face painting.	
I give consent for my child’s photograph to be used, if required, in displays or publicity.	

Costs are calculated on a monthly basis. Please tick your preferred method of payment:-

Online Arbor App _____ **or** **Childcare vouchers?** _____

Contract for Parents/Carers to sign:

The details set out in the information booklet, together with the details set out here constitute the contract.

The information contains details about:

- Operating times & Fees
- Aims & objectives
- Registration procedures
- Notification of absences
- Behaviour management
- Special needs
- Equal opportunities
- Health & Safety
- Accidents & First Aid
- Parental/Carers involvement
- Child Protection
- Confidentiality
- Complaints procedure
- Contact names and number

Once your child has been offered a place and attends the club, it is deemed that all parties have read and understood and agreed to abide by all policies and procedures as outlined. This forms the contract

I agree to the conditions as set out in the contract and to the additional consents ticked above.

Signed:	Name:	Date:
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For Office Use only

To be completed by a member of staff:

Signed:	Name:	Date:
Start date:	Signed:	