



Child Registration Form

Name of child _____ Date of birth _____

Name known as _____ Gender (male or female) _____

Name of parent(s) with whom the child lives

1 _____

Does this parent have parental responsibility? Yes/No (delete)

2 _____

Does this parent have parental responsibility? Yes/No (delete)

Address _____

Telephone _____ Mobile _____

Name of parent with whom the child does not live

Does this parent have parental responsibility? Yes/No (delete)

Address _____

Telephone _____ Mobile _____

Email Address _____

Emergency contact details

Parent 1 - Work/daytime contact number _____

Parent 2 - Work/daytime contact number _____

Any other emergency contact numbers

Name

Telephone

Mobile

Name

Telephone

Mobile

Persons authorised to collect the child (must be over 16 years of age)

Name

Relationship to child

Telephone

Mobile

Name

Relationship to child

Telephone

Mobile

Password required for collection

Does your child have any special dietary needs or preferences? Yes/No (delete)

If yes please give details below

Does your child have any allergies? Yes/No (delete)

If yes please give details below

Does your child have any special needs or disabilities? Yes/No (delete)

If yes please give details below

Does your child have a statement of special educational need? Yes/No (delete)

If yes what special support will he/she require in our setting

What other information is it important for us to know about your child? For example, what they like, or what fears they may have, any special words they use, or what comforter they may need and when.

Other Agencies

Names of professionals involved with child

Name 1	_____	Role	_____
Agency	_____	Telephone	_____

Name 2	_____	Role	_____
Agency	_____	Telephone	_____

Name 3	_____	Role	_____
Agency	_____	Telephone	_____

Do you have a health visitor? Yes/No (delete)

Name	_____	Based at	_____
Telephone	_____		

Does your family have a social care worker for any reason? Yes/No (delete)

If yes please give details below

Name: _____

Based at: _____

Tel: _____

What is the reason for the involvement of the social care department with your family?

How would you describe your child's ethnicity or cultural background?

What is the main religion in your family? _____

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is in our setting?

What language(s) is/ are spoken at home _____

If English is not the main language spoken at home, will this be your child's first experience of being in an English-speaking environment? Yes/No (delete)

If so, discuss and agree with the key person how you will support your child when settling-in:

To be completed by the key person/manager

Date starting at Southwell Afterschool Club CIC _____

Days and times of attendance _____

How will fees be paid? _____

Name of key person _____

Has the settling-in process been agreed? Yes / No (delete)

If so, detail

Signed by

Parent 1 _____

Parent 2 _____

Key person/Manager _____

Date _____

Equalities monitoring form – to be completed by the parent/carer

Ethnicity, where collected, should be recorded according to the following categories:

White – British

- Irish
- Traveller of Irish Heritage
- Gypsy/Roma
- Any other white background

Mixed – White and Black Caribbean

- White and Black African
- White and Asian
- Any other mixed background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

Black or Black British

- Caribbean
- African
- Any other Black background

Chinese

- Chinese

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Any other ethnic background

- Please state _____

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Emergency Medical Treatment

Child's Name:

Date of Birth:

Doctor's Name:

Doctor's Address:

Doctor's Telephone Number:

Any other relevant medical information (ie: Allergies, family medical history etc):

Parents/Carers Name:

Address:

Emergency Contact Number:

Child's Medical Number:

In the event that my child is involved in a serious incident while at the club, I expect the supervisor, or a delegated member of staff, to contact me immediately on the above emergency contact number.

In the event that my child requires immediate medical treatment before I will be able to get to the Hospital, I hereby authorise the supervisor, or a delegated member of staff, to consent to emergency medical treatment on my behalf.
I understand that this authorisation will remain valid unless I contact the supervisor or delegated member of staff to withdraw it.

Signature of Parent/Carer:

Date:

Sharing Information Form

The purpose of this form is to allow you to give consent to Southwell Afterschool Club CIC to share some or all of the information held about your child/ren in order to complete a particular assessment or deliver a particular service.

All organisations providing services to children and young people store and record information. They also need to communicate with other professionals in other organisations who may be involved with a child or hold information about them.

Our policy on Information sharing clearly sets out what information is held about your child/ren, why it held and why it may be shared with other organisations. A copy of this policy is available upon request.

In relation to the purpose of our information sharing policy, please tick one of the following:

- I agree that my child's personal information may be shared with other professionals/organisations as required as outlined in the sharing information policy.
- I do not agree that my child's personal information may be shared for the reasons outlined in the Sharing information policy.

I understand that consent to share information is limited to the purposes outlined in the sharing information policy, and that from time to time my consent to share information will be reviewed. I understand that information is held about my child/ren.

Signed: _____

Date: _____

Print: _____

Parental Consent form for use of photographs

Southwell Afterschool Club CIC

To : Name of child : _____

Name of the child's parent /Carer: _____

We may take photographs of the children during their time at the club. These images will be used in our clubs prospectus or in other printed publications that we produce, as well as on our website.

We may also be visited by the media who will take photographs or film footage of a visiting dignitary or other high profile event (school fetes etc). children may appear in these images, which may then appear in local or national newspapers, or on televised news programmes.

To comply with the Data Protection Act 1998, we need your permission before we can photograph or make any digital images of your child. Please answer questions 1 to 4 below, then sign and date the form where shown.

Please return the completed form to the club with your registration form.



Please circle your answer

- | | |
|---|-----------------|
| 1. May we the club use your child's photograph in the clubs prospectus and other printed publications that we produce for promotional purposes? | Yes / No |
| 2. May we use your child's image on our website? | Yes / No |
| 3. Are you happy for your child to appear in the media | Yes / No |
| 4. Offsite Activities – Are you happy for your child's photograph to be taken during off site activities | Yes / No |

Please note that websites can be viewed throughout the world and not just in the United Kingdom where UK law applies.

Please also note that the conditions for use of these photographs are on the back of this form.

I have read and understood the conditions of use on the back of this form.

Parent's or guardian's signature: _____ Date: _____

Name (in block capitals): _____

Conditions of use

1. This form is valid for five years from the date you sign it, or for the period of time your child attends Southwell Afterschool Club CIC **unless you notify us otherwise**. The consent will automatically expire after this time.
2. We will not re-use any photographs or images after your child leaves the club.
3. We will not use the personal details or full names (which means first name **and** surname) of any child or adult in a photographic image on our website, in our club prospectus or in any of our other printed publications.
4. We will not include personal e-mail or postal addresses, or telephone or fax numbers on our website, in our school prospectus or in other printed publications.
5. If we use photographs of individual pupils, we will not use the name of that child in the accompanying text or photo caption.
6. If we name a pupil in the text, we will not use a photograph of that child to accompany the article.
7. We may use group photographs with very general labels, such as “a science lesson” or “making Christmas decorations”.
8. We will only use images of children who are suitably dressed, to reduce the risk of such images being used inappropriately.

The Management Team
Southwell Afterschool Club CIC.