



Brampton Primary Afterschool Care Registration Form

The following information is totally confidential and will be held as a permanent record to support Brampton Primary Afterschool care bookings. Please advise us immediately of any changes.

Important note: Password for collecting child for those not listed below as emergency contacts.

Surname:		First Name:			
Gender:	Date of Birth:		Password:		
Parent/Carer Details		Parent/Carer De	tails		
Name:		Name:			
Home Address:		Home Address:			
Home Telephone No:		Home Telephone No:			
Mobile:		Mobile:			
Email:		Email:			
Daytime/Work Telephone Number & Extension:		Daytime/Work Telephone Number & Extension:			
Emergency Contacts: Please give that they are able to collect you	•	•	ted in the case of	f an emergency and	
Name	Relationship			Telephone Number	
Child's Health: Please provide of and/or physical statement):	details of significant	health issues (ind	 cluding special ec	ducational needs	
Details of any Special Dietary Requ	irements, Preferences	, food or other all	ergies (plasters, po	ollen, dust, etc):	
I consent to any emergency med attendance at the Club. I autho emergency medical treatment of consent would endanger my chi	rise Club staff to sigr on my behalf, if the d	n any form of wri	tten consent to	State Yes or No	

Parental Permissions:					
PLEASE CONSIDER THE FOLLOWING STATEMENTS AND STATE YES OR NO IN THE BOX	TO THE RIGHT OF				
EACH STATEMENT:					
Photographs/Moving Images: Occasionally, we may take photographs of the children in	our care.				
I agree to the use of my child's photograph/video footage being used in printed					
publications/display boards for promotional purposes. (Names will not be used in					
conjunction with photographs/footage).					
May we use your child's image on our website?					
Are you happy for your child to appear in press coverage?					
Out of School Activity: Your consent is required for your child to take part in certain activities:					
Undertake cooking and tasting activities?					
Do you consent for members of staff at the Club to apply sun cream to your child in					
hot conditions? (Child's arms, legs, shoulders and face, as appropriate).					
Do you consent to your child watching PG rated films?					
Do you consent for your child to use the Internet?					
May we walk your child to local areas, e.g. park, in a group with other children					
under adult supervision?					
Do you consent to your child having their face painted?					
Do you consent for your child to take part in messy play activities?					
Declaration/Consent:					
I hereby consent for my child to take up a place at this Club, according to the Terms					
and Conditions and its policies and procedures. I have understood the expectations					
and obligations relating to both myself and the Club and agree to abide by them.					
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I have given a security password for contacts not listed on the registration form					
that may collect my child.					
I have received a copy of the Club's Terms and Conditions and Information Leaflet.					
I have completed the Registration Form.					
I agree to abide by the cancellation notice requirements of the Club.					
I understand that persistent late payment or non-payment of fees will jeopardise					
my child's continued attendance at the Club.					
I confirm that the information given above is correct and I promise to contact the					
school immediately if any of the details change.					

Signature	OŤ	Parent/	Carer:

Date:

Please return form to: The school Office (This information may be stored electronically. All information is kept in accordance with the Data Protection Act and held in strictest confidence).