£25 Club membership payable annually per family, to be paid on return with this form Date paid

| Child's full name                         |                      |          |  |
|---|----------------------|----------|--|
| Home address                              |                      |          |  |
| Date of birth                             |                      |          |  |
| Gender                                    |                      |          |  |
| Ethnicity                                 |                      |          |  |
| Special educational                       |                      |          |  |
| needs status                              |                      |          |  |
| School name                               |                      |          |  |
|   |                      |          |  |
| Name of legal parents                     | or                   |          |  |
| guardian                                  |                      |          |  |
|   |                      |          |  |
| Home address of legal                     | parent               |          |  |
| or guardian                               |                      |          |  |
|   |                      |          |  |
| Legal parents and carers                  |                      |          |  |
| place of work and num                     | ber                  |          |  |
|   |                      |          |  |
| In case of emergency                      | call 1 <sup>st</sup> |          |  |
| point of contact                          |                      |          |  |
| Name and relationship                     | to child             |          |  |
| Name and relationship                     | to criliu            |          |  |
| In case of emergency call 2 <sup>nd</sup> |                      |          |  |
| point of contact                          |                      |          |  |
| Name and relationship to child            |                      |          |  |
|   |                      | <u> </u> |  |
| Email address                             |                      |          |  |
|   |                      |          |  |

Registration form Valid 1<sup>st</sup> August 2016 to 31<sup>st</sup> July 2017

## Details of other collectors

| Name   |                     |  |  |
|--|---------------------|--|--|
| Address  |                     |  |  |
| Contact number   |                     |  |  |
|  |                     |  |  |
| Name   |                     |  |  |
| Address  |                     |  |  |
| Contact number   |                     |  |  |
| ONLY THE PEOPLE NAMED ON THIS REGISTRATION FORM MAY COLLECT YOUR CHILDREN  |                     |  |  |
| Does your child have a problems?   | ny known medical    |  |  |
| Name and address of y  | your Child's Doctor |  |  |
| Does your child have a allergies?  | iny known           |  |  |
| Does your child have a with regards to food?   | ny major dislikes   |  |  |
| Is there any other information we need to be aware of the welfare of your child? For example any special needs or behaviour problems |                     |  |  |
| Do you have any other would like to share with   |                     |  |  |

Please feel free to discuss your child's development or any other concerns with a member of staff at Hebble Harlequins @ Gail & Jason's.

## Consent information

|  | Yes | No |
|--|-----|----|
| I consent to any emergency medical treatment necessary while my child is at the club   |     |    |
| I authorise the club's staff to sign any written consent forms required by the hospital/doctors authorities if the delay in getting my signature is considered by the doctor/hospital authorities to endanger my child's health and safety |     |    |
| I give my permission for my child to go on outings   |     |    |
| I give permission for my child to go on public transport   |     |    |
| I give permission for my child to travel in the club car's All staff have relevant licence and insurance   |     |    |
| I give my permission for staff at the club to apply plasters to my child   |     |    |
| I give my permission for my child to be given paracetamol based medication and allergy medication. A parent/carer will always be contacted before medication is given  |     |    |
| I give my permission for the staff at the club to apply sun cream to my child  |     |    |
| I give my permission for the staff at the club to take photographs of my child. I understand that these may be displayed on the walls  |     |    |
| I give my permission for my child to take part in outdoor activities, for example scooters, bikes, roller boots and skate boards   |     |    |
| I give my permission for my child's picture to be taken to go in local paper   |     |    |
| I give my permission for my child's photograph to go on Hebble Harlequins @ Gail & Jason's web site  |     |    |
| I give my permission for my child's photograph to go on Hebble Harlequins Face book page   |     |    |
| I give my permission for my child to watch P.G films   |     |    |

Registration form Valid 1<sup>st</sup> August 2016 to 31<sup>st</sup> July 2017

## TERMS AND CONDITIONS OF THE CLUB

Fees must be paid in advance

Weekly in advance in cash or on the 1st of the month in advance and must be paid by cash, direct debit, or voucher

Any outstanding fees at the end of each half term will have a charge of £30 added to the bill

If you fail to pay your fees in advance the club reserves the right to suspend your child until all outstanding fees are paid in full

Fees are set by Gail and Jason and are subject to review

If you no longer require a place at the club you must give 4 weeks' notice. This period must be paid for

All absences must be paid for whether due to holiday or ill health

The club will collect children from after school activities, but we must be made aware of your child's activity in advance

Care of the children while attending the club is the responsibility in the first instance of Gail and Jason

All children wishing to attend the club must have a completed registration form and paid the registration fee of £25 and the first instalment of their fee, prior to attendance. It is the parent/carer's responsibility to notify the club of any changes to the information contained in it

Children must be booked into the club or they will not be collected from school Gail or Jason must be informed of any absence at the earliest opportunity

Children must be collected promptly by 6pm at the latest by one of the people on the registration form or a fee will be charged

Reasonable behaviour is expected of all children, as well as the need to show respect and care for each other, the premises and equipment. The parent/carer may be required to pay for any deliberate damage

Positive action will be taken by staff to promote good behaviour. If children persist in unacceptable and disruptive behaviour, as a last resort, the club reserves the right to exclude them

Parents/Carers must inform their children that they may only leave the premises when accompanied by a person named on the registration form or a member of staff

In bad weather parents/carers must contact Gail or Jason to check whether the club is open

The club reserves the right to close at short notice

All these terms and conditions are subject to review by Gail and Jason who will try to give at least one month's notice of any changes

I wish to pay monthly in advance on the 1st of the month by: (please tick)

| BACS Transfer |  |
|---------------|--|
| Vouchers      |  |
| Cash (weekly) |  |

I have read and agreed to Hebble Harlequins @ Gail & Jason's Terms and Conditions.

| Parent's name      |  |
|--------------------|--|
| Parent's signature |  |
| Date               |  |