£20 Club membership payable annually per family

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 number |  |  |
| In case of emergency call 1st point of contact  Name and relationship to child |  | |
| In case of emergency call 2nd point of contact  Name and relationship to child |  | |

|  |  |
| --- | --- |
| Email address |  |

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 any known medical problems? |  |
| Does your child have any known allergies? |  |
| Does your child have any major dislikes with regards to food? |  |
| 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 information you would like to share with us? |  |
| 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 |  |  |
| 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 to watch P.G films |  |  |

TERMS AND CONDITIONS OF THE CLUB

**Fees must be paid in advance**

**Fee must be paid weekly, monthly or half termly 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 £20 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 staffIn 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 by: (please tick)

|  |  |
| --- | --- |
| Direct Debit |  |
| Vouchers |  |
| Cash |  |

I wish to pay: (please tick)

|  |  |
| --- | --- |
| Weekly in advance |  |
| Monthly in advance |  |
| Half termly in advance |  |

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

|  |  |
| --- | --- |
| Parent’s name |  |
| Parent’s signature |  |
| Date |  |