

**ENROLMENT FORM
CAMBRIDGE KIDS CLUB @ BOURN**

Please complete in block capital letter.

Child's details

Child's first name(s): Child's surname:

Child known as: (nickname)..... Child's gender: Male / Female

Child's date of birth: / /..... Child's School:

Teacher Name:..... Class name:

Mother's details: Parental Responsibility Legal Contact yes/no (Please supply evidence if needed)

Name Dr / Mrs / Ms / Miss:

Address:

..... Postcode:

Home phone number: Work phone number:

Mobile phone number: Place of work:

e-mail address:

Father's details: Parental Responsibility legal contact Yes/no(Please supply evidence if needed)

Name Dr / Mr:

Address (if different)

..... Postcode:

Home phone number: Work phone number:

Mobile phone number: Place of work:

e-mail address:

Emergency contact: If we cannot contact either of you who else may we contact?

Name: Number:

Relationship to child.....

Doctors & medical details

Doctor's name:

Surgery address:

Postcode: Telephone number:

Has your child had any serious illness or have any special needs? *If so, please give details*.....

.....
Is your child allergic to any medication? *If so, state which*

.....
Does your child have any Special Needs Provision YES / NO

Any further information:

Is your child a vegetarian or forbidden any type of food or drink? *If so, please give details*

.....
Any additional information you feel we should know about your child/ren or family circumstances

Can you us help ?

You as parents are a tremendous potential resource for educating our children and we would like to tap into this resource. Do you possess any particular skill e.g. play a musical instrument, make things etc.? Do you do something at work which might interest the children e.g. policeman, hospital worker?

If you would be willing to come to the after-school or school holiday club one day and talk to the children about anything we would be very grateful.

.....
.....
Bookings : Please state required attendance. Tick appropriate box(es)

	M	T	W	T	F
Afterschool Club - half session (3:15pm – 4.30pm)	q	q	q	q	q
Afterschool Club - full session (3.15pm-6pm)	q	q	q	q	q

Preferred start date:.....

Passwords

We use a unique password system to securely identify yourself if and when you would like to change collection arrangement for your children.

I would like my password to be:

Confirmation of agreement

Registration fee enclosed £ 20:00 (Payable to Cambridge Kidsclub)

I wish to enrol my child and have read and agree to abide by the terms & conditions of enrolment and the rules and terms of payment.

I understand that the club has a duty to report suspected child abuse or neglect.

Signed.....Date.....

If there is any further information you feel we should have, please supply it on a separate sheet.

CAMBRIDGE KIDSCLUB PERMISSIONS

It is good practice, and in some cases a requirement to seek your permission to undertake various actions on behalf of your child. Please indicate your agreement to the following:

Activities and trips

We like to take the children out of the premises for short activities from time to time. (Special events such as day trips or organised outings are treated separately).

1) *I give permission for my child to leave the premises* *Yes / No*

Medical

We are not normally permitted to administer medication unless prescribed by a Doctor. The exceptions is if your child is unwell or showing signs of a fever and early intervention is necessary and in an instance where we cannot contact you we would like to administer Calpol or similar paracetamol based formula.

2) *We may administer Calpol (or a similar substitute) if I am not contactable? Yes / No*

If we need to seek emergency medical treatment we need to show the Doctor/Hospital that you agree. (We will always try to contact you first.)

3) *We may seek emergency treatment when necessary?* *Yes / No*

Children are not permitted to play in the sun for anything other than short periods without the application of sunscreen.

4) *You may use sunscreen on my child* *Yes / No*

Photographs of your children

We are sometimes asked by local or national media to participate in publicity or news items.

5) *We may use an image of your child to be published:*

- *In the club's own publicity/ website* *Yes / No*
- *In a publicity feature in the press or television* *Yes / No*

Where did you hear about us?

Please help us focus our marketing.

6) *Where did you hear about the service we provide?(please circle)*

From the School / Web Search / Local Authority / Friend or work colleague / Other

7) *If other please state where:*

Child's name

Signed Date