

## REGISTRATION FORM FOR BREAKFAST CLUB/AFTERSCHOOL CLUB 2013/2014

Child's Details						
Name	Current year group	Date of Birth				
I wish to register my child for (please tick)  □ Breakfast Club	:					
☐ After school club						
☐ Breakfast and After school Club						
Parent/Carer Details						
Name	Name					
Home Address	Home Address					
Telephone:	Telephone:					
Work Address	Work Address					
Telephone:	Telephone:					
·	·					
Mobile Number:	Mobile Number					
Email Address	Email Address					

**Headteacher: Stuart Bellworthy** 

Blackbrook Community Primary School, Ashbourne Crescent, Taunton TA1 2RA
T: 01823 338138 F: 01823 352042 Email: office@blackbrook.somerset.sch.uk www.blackbrookschool.com













Alternative Emergency Contact Details (please provide details of at least one other person we can phone if we are not able to contact you)

Name	Relationship to Ch	nild	Mobile Number	
Address			Other Telephone Number:	
Name	Relationship to	Child	Mobile Number	
	Kolu Tolloring To		Mobile ( valido)	
Address			Other Telephone Number:	
Details of Child's Doctor				
Name of Doctor				
Address of Surgery  About Your Child		Telephone Number		
Please detail any additional/special needs:				
Please detail any medical needs including details of any medication:				
Please detail any allergies:				
Please detail any dietary require	ements:			
Any additional information:				

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- I consent to my child attending this club. I understand that the club has policies and procedures and there are expectations and obligations relating to the conduct of myself and my child and I agree to abide by them. I understand that failure to do so will mean that my child will no longer be able to attend the club.
- I understand that my child will be provided with a snack and drink whilst at the club unless otherwise requested.
- Once my child is delivered/collected for breakfast/after school club he/she will be
  in the care of the staff until collected and signed out by a 'named' responsible adult.
- I will inform the school office if my child will not be attending the club on a day that he/she is booked in to the club.
- I will pay promptly for sessions even when my child does not attend, unless other arrangements have been made with the school office
- I accept that whilst at the club my child may get involved in messy activities.

## Terms and Conditions

- I understand that persistent late or non-payment of fees may jeopardise my child's place.
- If my child is not collected by 6pm I will pay a charge of £10 per quarter of an hour to cover the costs of the two staff who are legally required to stay.
- If my child remains at 6.30pm, after doing everything possible to contact parents and emergency contacts, then I understand that the after school club staff contact the Headteacher and act on his advice.
- If all other options have been exhausted the school will have no alternative than to contact Children's Social Care.
- I understand that staff cannot be held responsible for any lost personal items.
- I understand that should there be any incidents at either the breakfast club or after school club involving my child, I will be informed of the situation.
- I understand that the school's and club's policies will apply to both the breakfast and after school clubs.

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- I understand that the information given on this registration form is confidential. However, there may be times, for example in the case of child protection concerns, when details may be passed to other agencies in line with the child protection policy.
- Where the club has endorsed my claim for Childcare Tax Credit I understand that I
  am legally obliged to notify the Inland Revenue if I cease to use the service during
  the period of my claim.
- I confirm that the information given on this form is correct and that it is my responsibility to keep the club updated of any changes to the information supplied above.
- I give permission for a member of staff to administer appropriate first aid if required.
- I give permission for a member of staff to seek any necessary emergency medical advice or treatment in the event that my child is involved in a serious accident. I expect to be contacted immediately on the above telephone numbers.
- I have read and, in signing this form, accept the above conditions for my child attending the breakfast/after school club.

I give permission for the named child to:	
<ul> <li>play in the school grounds with supervision</li> </ul>	
take part in individual / group photos	
<ul> <li>for photos to be used for promotion ie. Newspaper etc</li> </ul>	
Signature of Parent/CarerDate	·······
Please print name	

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