



South Walney Early Birds/Late Flight Club



Registration Form

Child/ren Details

Name	Current Year Group	Date of Birth

Parent/Carer Details

Name	Name
<u>Home Address</u>	<u>Home Address</u>
Home Telephone:	Home Telephone:
Work Telephone:	Work Telephone:
Mobile Number:	Mobile Number:
Email Address	Email Address

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

Name	Relationship to Child/ren	Mobile
Address		Other Telephone Number
Name	Relationship to Child/ren	Mobile Number
Address		Other Telephone Number



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Details of Doctor

Doctor/Surgery Name	
Address of Surgery	Telephone Number

About Your Child/ren

<p>Medical conditions:</p> <p><input type="checkbox"/> Asthma <input type="checkbox"/> Convulsions <input type="checkbox"/> Diabetes <input type="checkbox"/> Eczema</p> <p><input type="checkbox"/> Epilepsy <input type="checkbox"/> Heart condition (<i>Tick ALL that apply.</i>)</p> <p>Health Notes:</p>
<p>Allergens/Dietary Needs: Please detail any allergies and dietary needs:</p>
<p>Dietary Requirements:</p>
<p>Other: Please provide information about any other additional needs:</p>

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/ren is/are involved in a serious accident.
 Club Staff can provide a copy of the Administering Medicines Policy; please note that to have medicines administered it must be under exceptional circumstances and prescribed by the child's doctor, parents are required to fill in a form which is obtainable from the Club Staff or the school office.
 I will advise Club Staff if any of the above details change.

By completing and signing a South Walney Early Birds/Late Flight Registration Form, I confirm that I have read, understood and agree to comply with the Terms & Conditions of South Walney Early Birds Breakfast/Late Flight After School Clubs (available to view on the schools' websites: www.southwalneyjuniors.scmat.org.uk www.southwalney-inf.cumbria.sch.uk)

Signature of Parent/Carer Date

Please print name