

Cheeky Monkeys OSC Club Children's Registration Form

We need some details about your child and family. We have a legal obligation to collect and process this information in accordance with The Early Years Foundation Stage (Welfare Requirements) Regulations 2012. Where information to be supplied is voluntary or where we do need consent this is identified. The information provided will be kept and used for the purpose of maintaining appropriate contact details and for the safety and well-being of your child.

Child's details	
Full name:	Known as:
Date of birth:	Gender:
Name of Parent(s) with whom the child lives:	
Who else lives with your child?	
Parent/carer names(s)	
Parent/carer name:	Parent/carer name:
Relationship to child?	Relationship to child?
Do you have parental responsibility for this child? Yes/No If no, do you have legal contact? Yes/No	Do you have parental responsibility for this child? Yes/No If no, do you have legal contact? Yes/No
Address: Post code: Telephone number: Mobile number:	Address: Post code: Telephone number: Mobile number:
Place of work: Telephone number:	Place of work: Telephone number:
Email address for correspondence:	
Emergency contact details Please provide details of 2 people (other than the Parent/Carer) who we can contact in case of an emergency. <i>Note: It is your responsibility to ensure these people have given you permission to provide these details and are happy for us to contact them when required to do so</i>	
Emergency contact 1 Home Telephone number: Mobile Telephone Number: Relationship to child:	Emergency contact 2 Home Telephone number: Mobile Telephone Number: Relationship to child:
Bill Payer Details	
Bill Payers Name: Relationship to Child: Address: Post Code:	Telephone Number: Mobile Number: Place of Work: Telephone Number:

Security Details

A password system operates in our setting. A secure password is required and should be used by emergency contacts and persons authorised to collect your child. Ideally this should be one word and something that is easily memorable. Please do not use obvious things such as middle names. The password is required from anyone collecting your child. If they do not have the password we will not release your child to them.

Please provide a collection password:

Authorised Person 1

Name:
Home Telephone:
Mobile Number:
Relationship to child:

Authorised Person 2

Name:
Home Telephone:
Mobile Number:
Relationship to child:

Medical Details:

Name of Doctor:
Surgery:
Address:

Telephone number:

Does your child from any of the following?

Asthma		Diabetes	
Epilepsy		Kidney/bladder problems	
Heart condition		Allergies	
Sight impairment		Hearing impairment	
Other			

Does your child require medication?(please provide name of medication and dosage)

Does your child have any dietary requirements?

I can confirm my child has no plaster allergies and agree for them to be applied for minor cuts.
Yes/No

I give permission for my child to receive medical treatment and advice in an emergency:

Signed:

Date:

The following section requires information classed as 'sensitive personal data' for which we need your consent to collect and process. We request this data as, in some cases we have a contractual obligation to do so with our Local Authority, but also as we have a legitimate interest to allow us to plan and meet your child's needs.

Ethnicity and Cultural Background

Religion:

Ethnicity/cultural background:

Language:

Special Educational Needs

Does your child have any special educational needs? Please provide details:

What support will they require whilst at the club (if any)?

The following section contains information for which we need your consent. As required by data protection we have a duty to inform you that you can withdraw your consent for any of the permissions detailed below at any time. Should you wish to withdraw consent please discuss this with a member of staff in the first instance.

Permissions and Consents	
<p>If emergency treatment is required, either whilst your child is on the premises or on an outing, (for the duration of your child's time with us) and the parents or carers cannot be reached immediately, your signature in the space provided below empowers the settings management to exercise their own judgement in calling the doctor/dentist indicated above or to transport the child to a hospital casualty department by ambulance.</p> <p>I give consent on my behalf for an anaesthetic to be administered or for any other urgent medical treatment to be given.</p> <p>Yes / No</p> <p>If no please indicate your wishes as follows:</p> <p>I give consent to my child having sun-cream applied at the club/applying their own sun-cream at the club.</p> <p>Yes / No</p> <p>If no please indicate your wishes as follows:</p>	
<p>Signed: _____ Date: _____</p>	
<p>Photography: Tick the following to give consent:</p> <p>I give consent for images of my child to be used for the following:</p>	
	Observation and assessment
	Displays and exhibitions at the club
	Club records of my child
	Newsletters (electronic and printed)
	Other children's profile books
<p>Activities: Tick the following to give consent:</p>	
	<input type="checkbox"/> I give permission for my child to participate in all club activities
<p>Please indicate if there are any activities you do not wish your child to participate in:</p>	
<p>Please sign to confirm your consent for the indicated statements:</p>	
<p>Signed: _____ Date: _____</p>	
Declaration	
<p>It is your responsibility to keep Cheeky Mon keys OSC Ltd Club up to date with any changes to the personal information provided.</p> <p><input type="checkbox"/> Please tick the box to confirm you give consent for Cheeky Mon keys OSC Ltd Club to retain and process all personal information provided in accordance with the General Data Protection Regulations 2018.</p>	
<p>Signed: _____ Date: _____</p>	

Registration Form Review

This form is to be reviewed regularly and you must notify Cheeky Monkeys OSC Club Ltd of any changes to the details in this form ASAP.

Please sign and date below when you have reviewed this form.

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____

Parent / Carer Signature _____ Date _____



Cheeky Monkeys OSC Ltd Booking Form

Name of Child: _____ D.O.B _____

Address: _____

Post Code: _____

Tel No: _____

PLEASE COMPLETE BY TICKING THE DAYS AND SESSIONS YOU REQUIRE YOUR CHILD TO ATTEND

	Breakfast club	After school club
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
On a casual basis*		

**Please note: we cannot guarantee a space for casual basis*

PLEASE READ AND UNDERSTAND THE BOOKING TERMS AND CONDITIONS BELOW:

Booking Terms and Conditions

- You must inform the Club Manager/Deputy before the session if you are collecting your child from school or they have not attended school on the day that they are booked in to the club.
- Refunds will not be issued for non-attendance of pre-booked sessions.
- There is no guaranteed space for bookings on a casual basis.
- If your child is not collected by 5.30pm there will be a charge of £4.00 per 15 minutes to cover the costs of the two staff that are legally required to stay.
- If any child remains at the club at 6.00pm, after doing everything possible to contact parents and emergency contacts, then Cheeky Monkeys OSC Club will be legally required to contact the First Response Team (Social Service).
- If your child attends an after-school activity organised by the school during a booked session with Cheeky Monkeys OSC Club you will be charged for this session. This is due to Cheeky Monkeys OSC Club having to provide adequate staff ratios in the event that the school after school activity is cancelled.
- Invoices must be paid for before the end of the month of its issue date. Failure to do so may result in your child's place being suspended until payment has been received and will incur a £5.00 late payment fee.
- Failure to comply with the above terms and conditions may result in termination of your contract.

I have read and understood the above booking terms and conditions and I agree to abide by them.

For further information please see our company policies.

Signed Parent / Carer: _____ Date: _____