

(PLEASE USE BLOCK CAPITALS)

Kids Club Registration and Consent Form.

NAME:				
ADDRESS:				
	POSTCODE:			
PHONE NO:	EMAIL:			
MOBILE:				
DATE OF BIRTH				AGE:
SCHOOL:				YEAR
GENDER: Please tick:	<u>MALE</u> <input type="checkbox"/>	<u>FEMALE</u> <input type="checkbox"/>		
Does your child have any long term illness, health problems, medical problem or a disability? If yes, please state, e.g. learning disability / asthma / diabetes / epilepsy / etc.				
Emergency contact	<u>Please provide at least two emergency contacts</u>			
<u>Name & Number</u>				
<u>Name & Number</u>				
To ensure the safety of children please inform us of your arrangements to ensure your child returns home:				
My child will be collected by:				
My child will make their own way home:				
<u>Please state on the day whether or not the same person will be collecting your child after kids club.</u>				
Ethnicity- defined as:		Please Tick		
White	British <input type="checkbox"/>	Irish <input type="checkbox"/>	Other <input type="checkbox"/>	
Asian or Asian British	Indian <input type="checkbox"/>	Pakistani <input type="checkbox"/>	Bangladeshi <input type="checkbox"/>	other <input type="checkbox"/>
Mixed	White/Black Caribbean <input type="checkbox"/>	White/Black African <input type="checkbox"/>	White Asian <input type="checkbox"/>	other <input type="checkbox"/>
Black or black British	Caribbean <input type="checkbox"/>	African <input type="checkbox"/>	Other <input type="checkbox"/>	
Chinese or other	Chinese <input type="checkbox"/>	Other ethnic group <input type="checkbox"/>		
Where did you hear about the kids club? (please tick one)				
HLC <input type="checkbox"/>	WEBSITE <input type="checkbox"/>	SCHOOL <input type="checkbox"/>		
LIBRARY <input type="checkbox"/>	NEWSPAPER <input type="checkbox"/>	WORD OF MOUTH <input type="checkbox"/>		
Other (please state)				



Declaration:

I undertake to inform a member of Hadley Learning Community staff of any changes in the information that is provided on this form. I hereby agree that in the event of my child being returned early from activity any costs incurred as a result of my child's misbehaviour will be liable to reimburse Interserve in full. I understand that in the event of any injury or illness all reasonable steps will be taken to contact me, to deal with the injury or illness appropriately and that by returning this completed form I agree to my child taking part in the activities .

Consent statement:

I give consent for my child to take part in the daily activities and having received and read the information provided, agree to their participation. I acknowledge the need for obedience and responsible behaviour on their part.

Data protection:

All information provided is for the use of Hadley Learning Community only and will not be passed on to any third party companies.

From time to time we may wish to take photographs of our session for advertising purpose. If you DO NOT wish for your child to be photographed at any time during these sessions please tick the box.

Customer information

A packed lunch and plenty to drink will be required for all children who are attending all day. Packed lunches can be now purchased from our onsite catering company Eden food.(lunch orders will need to be paid for and received by 9.00 am that day).

Signed by parent/guardian.....Date.....

Signed by member of staff.....Date.....



Interserve
Education

Booking form

Monday	Tuesday	Wednesday	Thursday	Friday
FILM CLUB 8.00-9.00 <input type="checkbox"/>	FILM CLUB 8.00-9.00 <input type="checkbox"/>	FILM CLUB 8.00-9.00 <input type="checkbox"/>	FILM CLUB 8.00-9.00 <input type="checkbox"/>	FILM CLUB 8.00-9.00 <input type="checkbox"/>
Whole Day 9.00-5.00 <input type="checkbox"/>	Whole Day 9.00-5.00 <input type="checkbox"/>	Whole Day 9.00-5.00 <input type="checkbox"/>	Whole Day 9.00-5.00 <input type="checkbox"/>	Whole Day 9.00-5.00 <input type="checkbox"/>
Morning 9.00-12.30 <input type="checkbox"/>	Morning 9.00-12.30 <input type="checkbox"/>	Morning 9.00-12.30 <input type="checkbox"/>	Morning 9.00-12.30 <input type="checkbox"/>	Morning 9.00-12.30 <input type="checkbox"/>
Afternoon 1.00-5.00 <input type="checkbox"/>	Afternoon 1.00-5.00 <input type="checkbox"/>	Afternoon 1.00-5.00 <input type="checkbox"/>	Afternoon 1.00-5.00 <input type="checkbox"/>	Afternoon 1.00-5.00 <input type="checkbox"/>
Kids club lunch <input type="checkbox"/>	Kids club lunch <input type="checkbox"/>	Kids club lunch <input type="checkbox"/>	Kids club lunch <input type="checkbox"/>	Kids club lunch <input type="checkbox"/>
Receipt number & date:	Receipt number & date:	Receipt number & date:	Receipt number & date:	Receipt number & date: