



After School Club

Children's Information Form

Please complete all information. Each child will need a **separate** form.

Please return the form(s) to the school office.

Child's full name:	
Date of Birth:	
Age from September:	
Class Name:	
Home Address:	
Contact Telephone Numbers:	Home: Mobile: Work:
Email Address:	
Emergency Contact: (must be a different person from above and someone close to school)	
Medical Information:	Doctor's name: Name of Surgery: Telephone Number:
Medical Conditions or Disabilities:	
Allergies:	
Name of regular medication your child may be taking and dosage:	
Is there any activity your child should avoid?	
Dietary requirements / food allergies / food preferences and any other relevant information:	

Consent for using images of children

Occasionally, we may take photographs or DVD recordings of the children for use within the club for promotional, play training and monitoring.

Occasionally representatives from the media may also take photographs and recordings and the children will often appear in these images, which may be reproduced in local or national newspapers, or in televised news programmes.

To comply with the Data Protection Act 1998, we need your permission before we can photograph or make recordings of your child. Please indicate your preference:

Yes I give my consent	No I would rather my child not appear
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Activity Participation checklist

	Yes	No
I give Peartree Spring Primary School ASC consent to seek any necessary emergency medical advice or treatment in the future.		
I give Peartree Spring Primary School ASC permission to apply sun cream in hot weather.		
I give my child permission to take part in face painting activities if they wish.		
I give Peartree Spring Primary School ASC permission to apply plasters if my child needs one.		

Children will only be allowed offsite with the persons stated on the list below, unless prior arrangements have been made. Please set a password below and make sure the collectee has been given the password.

PASSWORD:

I give consent to the following people to collect my child from Peartree Spring ASC:

Name of Adult:	Relationship to Child:

Parent/Carer/Guardian Signature:

Date

PLEASE MAKE A NOTE OF OUR CONTACT DETAILS:

**After School Club Mobile: 07379 837848
Peartree Spring Primary School Office: 01438 233900**