

Smarties Breakfast, Afterschool & Holiday Club Registration Form

Please circle if the registration form is for BREAKFAST / AFTERSCHOOL / HOLIDAY							
	TERSCHOOL / HO	JLIDAY					
Please enrol my child in	the above club fro	om (date):					
Child's full name:				Age:		Date of birth:	
Home address & Post Code:							
School attending and times for collection							
Days & sessions required (Please Tick)	Monday	Tuesday	Wednesda	ау Т	hursday	Friday	
Breakfast							
After School							
Ethnicity:			Language Sp	oken:			
Religion (if any):							
Name of parent/carer:			Daytime tel no:				
(Relationship/Parental R	Responsibility)		Mobile no:				
			Work no:				
			Email Address:				
Parent Details (Name, P	hone Number & E	mail Address)					
Name of parent/carer:			Daytime tel no:				
(Relationship/Parental Responsibility)			Mobile no:				
			Work no:				
			Email Address:				
Parent Details (Name, Phone Number & Email Address)							
The named child is only allowed to leave with their parent or emergency contact listed below (please ensure that named person(s) can provide ID if required and/or a password).			Please provide a	a password	d here:		

Note: Pare	nts must advise the club	if they have	e made	e an alternative arrangement for collection of their child.
	act details of emergency norised to collect your cl			nip:
If there is a the child:	ny person who you do n	ot want to	pick up	o your child, please provide their name and relationship to
Any other a	agencies involved with th	ne family (o	ptional	()
What are y (Interests/f	our child's likes? oods/etc.)			
What are y (Interests/f	our child's dislikes? oods/etc.)			
	child have any other require support?			
Doctor's name:		Surgery address:		
		Tel no:		
Please list t	he child's allergies/prefe	erences (if a	iny):	
A care plan will be provided if your child has any allergies. Is your child taking any medication? (If YES, please request and complete a separate care (circle one option) YES / NO Mathematication A care plan will be provided if your child is on any medication medication			(If YES , please request and complete a separate care plan) A care plan will be provided if your child is on any	
Do you give permission for your child to be given Calpol/Neurofen if necessary? (Calpol is not being given temporarily due to COVID symptoms)		/ NO		
administer	e permission for first aid ed by a trained practition f an accident?		/ NO	(If NO , please advise on preferred course of action)

An ambulance will be called in the		(If YES, please give details)
event of a serious accident. Do you have any medical information that you need us to pass on?	YES / NO	

In order to ensure the correct provision is made for your child, it is vital that you inform us of all relevant information. If you answer **YES** to any of the items below, please provide further information to help us assist your child.

Foods not to be eaten for religious or other reasons:	YES / NO	(If YES , please give details)	
Communication difficulties:	YES / NO	(If YES , please give details)	
Medical conditions:	YES / NO	(If YES , please give details)	
Do you give permission for your child to be face painted?		YES / NO	
Do you give permission for sunscreen to be applied to your child? (We use Aldi 50+ Sensitive for children)		YES / NO	
Do you give permission for your child to be photographed or filmed for use by the club for in-house purposes?		YES / NO	

I confirm that the information given above is correct, and I will contact the club as soon as any of the details change.

Signature of parent:

Date:

If you have any questions or comments, please contact the club manager Marsha Giles or a member of the management team (Melissa Pavelin, Sophie Lines, Ian Pavelin or Coral Pithers)

This policy was approved by the Management Team and The Board of Little Smarties and will be reviewed on an annual basis, or sooner if required.

Parent contract

Smarties Breakfast, Afterschool & Holiday Club

Full name of parent/carer:

Person with responsibility for the child:

Child's full name:

- I understand that Smarties Breakfast, Afterschool & Holiday Club is a childcare facility and that whilst my child is in attendance, they are responsible for him/her.
- My child will be provided with a variety of cereals, fruit and toast for breakfast and/or a hot meal in the evening.
- Holiday club will be provided with a cold picnic lunch when out on activities, hot lunch when on the premises.
- My child will be provided with stimulating play in a fun and safe environment.
- Once my child is delivered to Smarties Club he/she will be in the care of the wrap around care team until collected and signed out by an assigned member of staff.
- I will inform the club of any additional or medical needs my child may have. I will update the club whenever any general, medical, allergy information changes, or of any other changes that may impact on my child's needs or behaviour.
- It is my responsibility to keep the club informed of any alterations to information regarding my child.
- I will inform the club if I have made arrangements for another responsible adult to collect my child at the end of a session (the password from the registration form will be required if this occurs).
- I understand that Smarties Club closes at 18:00 and will ensure that my child is collected from the club no later than this. If for any unforeseen reason I am going to be late, I will contact the club immediately.
- If my child is not collected by 18:00, I will pay a charge of £15 per 15 minutes to cover the costs of the two staff that are legally required to stay (I know that this will be added to my invoice the following month).
- Invoices will be emailed by the 25th of every month and I MUST pay this by the 5th of every month otherwise a charge will be incurred.
- If my child remains at the nursery, exceeding 19:00, after staff have tried to contact parents/carers and emergency contacts, then they will be legally required to contact Social Services.
- If I cancel a pre-booked session, I will pay the full fee. I understand that in the club you pay for your space regardless of if you attend or not.

- I understand that if I wish to terminate my contract with Smarties Club, I must give 1 months' notice.
- I accept that whilst at the club my child may get involved in messy activities.
- Whilst Smarties Club aims to ensure the safety and security of items, the club cannot be held responsible for anything lost or stolen.
- I am aware that my child will be transported using company vehicles or staff vehicles with the appropriate insurance cover.
- Should there be any incidents at the club involving my child, I will be informed of the incident.
- If my child has an accident, he/she will be treated by a member of staff if I have given consent for this, and I will be informed of the situation as soon as possible. If there is a situation where my child needs urgent medical treatment and I am unavailable, the member of staff from the club may sign any consent forms necessary for treatment on my behalf.
- Any information and details regarding my child will be treated as confidential. However, there may be times, for example in cases of child protection concerns, when details of my child may be passed on to other agencies, for example Police, Social Services and health care professionals.
- I am aware of all policies and procedures and will request/read these.
- I know policies can be found on Little Smarties website and/or on reception in hard copy.
- I understand that all information I give will be stored under the guidelines and regulations of the Data Protection Act.

I consent for my child to take up a place at this club, according to the terms and conditions set out in this parental contract.

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

Parent/Carer Signature:
Print name:
Date:

Signature of Manger
Print name:
Date:

This contract was approved and written by the Management Team and Little Smarties Board Members