

St Stephens Junior School

EXTENDED SCHOOL CLUBS REGISTRATION FORM

Please fully complete both sides of this form.

<u>Name of Child</u>	<u>Name of Child</u>	<u>Name of Child</u>
<u>Date of Birth</u>	<u>Date of Birth</u>	<u>Date of Birth</u>
<u>Class</u>	<u>Class</u>	<u>Class</u>
<u>Home Address</u>		
<u>Email address:</u>		
<u>Name and Address of Family Doctor</u>		
<u>Medical Information and Allergies</u>	<u>Medical Information and Allergies</u>	<u>Medical Information and Allergies</u>
<u>Food Intolerances and Dietary Requirements</u>	<u>Food Intolerance and Dietary Requirements</u>	<u>Food Intolerances and Dietary Requirements</u>

BREAKFAST CLUB:				7.30AM – 8.45AM -	
				£6.25	
<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	

AFTERSCHOOL CLUB:				3.00PM – 5.00PM -	
				£9.25	
<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>	
AFTERSCHOOL CLUB:				3.00PM – 6.00PM -	
				£11.00	
<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>THERE IS NO 6PM FINISH ON A FRIDAY</u>	

PLEASE NOTE RECEPTION YEAR CHILDREN CAN ONLY ATTEND FROM 8AM UNTIL 5PM DAILY.

Additional Useful Information

Do you consent to the following?

Photographs being taken for our records and display boards.	Yes / No
Qualified staff administering emergency first aid.	Yes / No
Your child / children participating in face painting activities.	Yes / No
Staff providing Paracetamol / medication if required.	Yes / No
For my child/ren to watch films certified U and PG	Yes / No
I give permission for my child's photo to appear on the Extended School 'My School App'	Yes / No

Person with parental responsibility / main carer

Title:
First Name:
Surname:
Relationship to child:
Phone – Home:
Phone – Mobile:
Phone – Work:

Second Contact

Title:
First Name:
Surname:
Relationship to child:
Phone – Home:
Phone – Mobile:
Phone – Work:

Trusted Friend/Family Member

Title:
First Name:
Surname:
Relationship to child:
Phone – Home:
Phone – Mobile:
Phone – Work:

Please note, if you ask anyone else to collect your child for you they will need your password.

Password:

I agree to my child/ren taking a place at St Stephens Junior Extended Schools in accordance with the Terms and Conditions set out in the clubs policies.

Parent / Carer Signature :

Date: