

## **Admissions Form**

Child's Full Name:

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Name to be used at the Club:

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Sex:

Year group:

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Date of Birth:

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Names /ages of siblings using Club:

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Names of Parents/Carers:

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Home Address:

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Telephone Number:

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Mobile Number(s):

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Parents/Carers Place of Work / contact numbers:

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Other Emergency Contact Details:

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Names of Other Persons Authorised to collect your child (including contact numbers):

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Doctor's Name:

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Doctor's Address/Telephone Number:

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Health Visitors Name (if applicable):

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Health Visitors Address/Telephone Number (if applicable):

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Details of any Significant Health Issues (including a special educational needs and/or physical disabilities statement):

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Details of any Special Dietary Requirements, Allergies and Significant Food and Drink Preferences:

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Do you consent for members of staff at the Club to apply sun cream to your child in hot conditions?

Yes/No

Any Other Relevant Information:

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I hereby consent for my child to take up a place at this Club, according to the terms and conditions set out in its policies and procedures. I have understood the expectations and obligations relating to both myself and the Club, and agree to abide by them.

I understand that persistent late or non-payment of fees will jeopardise my child's continued attendance at the Club.

I confirm that the information given above is correct, and I promise to contact the Manager as soon as any of the details change.

Signature of Parent/Carer:

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Date:

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If you have any questions or comments please contact the Club Managers:

Helen Day 619782  
Cath Purchase 620214.