



R.B. Kids Club

Registration Form



Telephone – 07742 822550

Child's First Name

Known Name (if different)

Surname

Date of Birth

Home Tel. No.

Age

Home Address

Postcode

Parents Details

Name of Person who has Parental Responsibility

Parent 1 Name

Parent 2 Name

Place of Work

Place of Work

Department (if any)

Department (if any)

Work Tel. No.

Work Tel. No.

Mobile Tel. No.

Mobile Tel. No.

Emergency Contacts (other than parent/guardian)

Name

Relationship

Tel. No.

Address

Medical Information

Doctor's Name

Address

Tel. No.

Does your child have any disabilities or learning difficulties?

Does your child suffer from any allergies or have any special dietary requirements e.g. food allergies or hay fever etc?

Does your child suffer from any medical conditions e.g. asthma, epilepsy, diabetes etc.?

If your child were to require medical attention due to an injury, is there anything that our staff should be aware of when carrying out first aid procedures e.g. allergies to plasters or other dressings which may be used?

IMPORTANT! WE MUST BE NOTIFIED OF ANY CHANGE IN THE ABOVE DETAILS IMMEDIATELY.

Consent

Do you give permission for your child to receive appropriate medical attention in the case of an accident or emergency?

Signed

Date

Please note: You will be contacted immediately in the event of any serious medical emergency. For this reason it is vital that you keep us informed of any changes to the emergency contact details.

Other Information

Photographs

From time to time R.B. Kids Club staff will use digital cameras to record and display photographs of your children taking part in the different activities taking place at the club and on trips.

Please sign in the box below if you give consent if you are happy for the club to display such photographs of your child.

Signed (parent/guardian)

Date

Collection of Children

In the event you are unable to collect your child from R.B Kids Club please provide us with the name of a family friend or neighbour who would be able to do.

Name of Person

Signed (Parent / Guardian)

Ethnicity

Race Identity: Please state your preferred description (e.g. Black, White, other)

Ethnic Identity: Please indicate which ethnic group you belong to (e.g. British, Indian, Caribbean, etc)

Declaration

I agree that the information provided on this form is accurate to the best of my knowledge and that I will keep R.B. Kids Club informed of any changes should they occur.

Signed (parent/guardian)

Date

Name (in Block Capitals)