

Admissions Form
The Hummingbirds Out of School Club

Childs Name	
Childs address (If your child has a double living arrangement please could you state on which days your child is living at each address) We ask this in the case of contacting you in an emergency.	
Date of birth	
Gender	Male <input type="checkbox"/> Female <input type="checkbox"/>
Ethnicity	
Religion	
Languages spoken	
Any Specific beliefs	

Parent:1	
Full Name	
Address	
Home telephone Number	
Mobile number	
Place of work (include telephone number)	

Parent:2	
Full Name	
Address(if different to above)	
Home telephone Number	
Mobile number	
Place of work (include telephone number)	

Please complete the following part stating which parent/carer has Parental responsibility or Legal Responsibility

Parent /Carer	Parental or Legal Responsibility

Other people authorised to collect your child/children

Name	Relationship to child	Telephone Number

Medical Information:

Doctors Name	
Address	
Telephone Number	
Health Visitors name (if applicable)	

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

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

I _____ (name of person with parental responsibility) hereby give permission for my child to attend outings within the local community whilst attending the club.

Do you consent for members of staff at the club to apply sun cream to your child in hot conditions?
Yes/No

Do you consent for a member of staff at the club to apply a plaster to your child in the event of a medical accident if required?
Yes/ No

Any Other Relevant Information:

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 Supervisor as soon as any of the details change.

Signature of Parent/Carer:

Date:

If you have any questions or comments please get in touch with the Out of School Club Supervisor