



**Woodside Primary Academy
February Half Term 2019
Registration Form**



Child's Details

First Name: 	Surname: 	Class:
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Days needed (please tick)

- Monday 18th February 2019
Tuesday 19th February 2019
Wednesday 20th February 2019
Thursday 21st February 2019
Friday 22nd February 2019

Parent Declaration:

Payment

I understand each day is £25 and I will provide a packed lunch for my child (breakfast and light tea provided)

I agree to pay for the days at least a week in advance on parent pay.

Late Collection

Late collection of my child will result in a charge of £1 per minute, minimum £10. I understand that persistent late or non-payment of fees may jeopardise my child's continued place. In an emergency I will ring the school / Club's mobile number.

Medical

I give permission for a trained member of staff to administer appropriate first aid if required.

I give permission for Woodside's October half term Club to seek any necessary emergency medical advice or treatment in the event that my child is involved in a serious accident. In the event of my child needing hospital treatment, I allow a member of staff to accompany my child to hospital to seek advice and treatment from a medical practitioner. I expect to be contacted immediately on the above telephone numbers.

If my child becomes ill during a session, I agree to collect or arrange collection of my child as soon as possible.

Trips

I agree to my child being taken off the premises for any local visit to parks or shops.

Behaviour and Safeguarding

I consent for my child to attend this club. I understand that the club has policies and procedures and that there are expectations and obligations relating to both the club and myself and my child. I agree to abide by them Woodside's seven life values.

I confirm that the information given on all forms is correct and agree to notify the club staff of any changes in detail.

I understand that all the school's policies will apply to October half term Club, including Child Protection and Data Protection.

I understand that the information given on this registration form is confidential.

I have read and accept the above conditions and the Woodside Procedure Policy for my child attending Woodside's October Half Term Holiday Club.

Signature of Parent/Carer/Guardian: _____ Date _____