ENROLMENT FORM/CONTRACT

Child's Current Full Name:

The relationship between a child's parents and a setting is crucial to the child's well -being. The welfare, safety and protection of your child are at the heart of everything we do. To enable us to make the best provision for your child we are officially required to ask for information to be provided to us. Please understand that there are sound reasons why we are required to ask these questions. We want to help your child to keep safe, it is not just that we are being curious. Thank you for your co-operation.

		Hookstone Road
Also Known As:		Harrogate, HG2 8BT
Any Previous Names:	· · · · · · · · · · · · · · · · · · ·	Tel: 07952 871093
Date of Birth:		E-mail: oatlands@funcare.co.uk
Child's Current Address:	· · · · · · · · · · · · · · · · · · ·	www.funcare.co.uk
	· · · · · · · · · · · · · · · · · · ·	Postcode:
Home Tel:	e-mail address (for correspondance):	
Any Previous Addresses:		Teacher:
		Year:
Details of Parents/Carers & Emerger	ncy Contacts:	
Main contact/Person with parental responsibility	Person with parental responsibility or an additional emergency contact. (Delete as appropriate)	Additional Emergency Contact
Names:	Names:	Names:
Relationships:	Relationships:	Relationships:
Address: if different from above	Address:	Address:
Home Tel:	Home Tel:	Home Tel:
Work Tel:	Work Tel:	Work Tel:
Mobiles:	Mobiles:	Mobiles:
unauthorised person is required to collect	to collect your child and in addition supply a pa your child. If you wish for an unauthorised pe amed person brings some form of photo ID to p	rson to collect your child we do insist that
I understand that is my responsibility to	have obtained consent from all emergency col Agree []	ntacts to supply their personal information.
Authorised names:		
		Password:

2018/19

c/o Oatlands Infant School

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Sess	ıon	dei	aı	ıs:

Please	tick	req	uested	place	rec	quirements:

0	Reauested	Stant	Data:	
п	Keauestea	START	Date:	

Session	Mon	Tues	Weds	Thurs	Fri
AM (7.30am-9.00am)					
PM (3.05pm-5.00pm)					
LATE PM (3.05pm-6.00pm)					

Please note that we require 4 weeks notice or fees in lieu for any changes or cancellations. Additional sessions may be booked on a casual basis, subject to availability. Holiday care will be booked separately. Fees will be charged for all booked term time sessions, regardless of attendance.

Payment Terms: Invoices will be issued via email and are payable in advance of attendance. Additional sessions are paid for at time of booking. Failure to pay on time will result in a late payment fee of £5 per child per week overdue, and your child's place may be withdrawn.

Bill payer name/s:		
Bill payer email (for invoices):		
Additional Information:		
Child's Doctor (Name, Address, Tel No.):		
Any known allergies/illnesses. If medication is required ie inhalers/epi pen/piriton etc this must be available at Funclub at all times the child attends and ar additional care plan must be completed. Please see the manager for further info.	- I	
Any additional needs/cultural or dietary requirements:		
1 st & 2 nd languages:	_	

Safeguarding Children Statement: Please note that if we have any concerns about your child's development, welfare or safety, we will speak to you immediately. We are required to keep records of these concerns, and when we feel it necessary the advice of other professionals will be sought (in accordance with our Safeguarding Children Policy and Procedures). All matters will be dealt with in consultation with parents / carers and in the strictest confidence.

Signed:	(Parent/Carer)	Date:
Signed:	(Parent/Carer)	Date:
com	aply with the terms and conditions set o	ut tnerein.
	·	at anytime for me to refer to and I agree to
		ully this form and information leaflet. I
6) Sharing Information with other Profession of the child with other professionals involved		thare any relevant information pertaining to the care
		and/or on paper for up to 21 years for the sole use ir most up-to-date information at all times. AGREE []
4) Outings & Excursions: I confirm that my c	hild may participate in Outings & Excursions by	transport or on foot on an on-going basis. AGREE []
	e taken of my child. Photos will only be used for publically published without further consent.	r Funclub displays onsite and on Famly where other AGREE []
- · · · · · · · · · · · · · · · · · · ·	that in case of emergency, club staff may invol you first, but should we have trouble contacting	
•	ster first aid to the children, please delete any s/Micropore Tape/Plasters/Cold Compresses.	preparations you do not wish us to use on your child: AGREE []
Please tick each statement to agree or attention for further information:	highlight any permissions not acceptable	to you and bring these to the managers
Please continue over the page if necessary		
4. Any other factors which may impact on the	•	
3. Any child protection plan which your child is	s subject to?	
contact order, care order, injunction etc.) Is which will help us to care for your child?	s there any information from these orders that	t our setting needs to be aware of
· · · · · · · · · · · · · · · · · · ·	those which affect any person's access to the	-
•	fessionals who have contact with your child or	•
Please give details below of any of the	following factors that may be relevant t	to your child:

Signed:_____(for Funclub)

Date:____

RE: GENERAL DATA PROTECTION REGULATIONS 2018

We are required by law to keep certain information regarding you and your child for statutory and for business purposes. We will not keep any more information than necessary. This information is kept securely on our premises in locked cabinets and only accessed by the Management Team key holders. We will only use your (including your child's) personal information to provide a childcare service to you.

We keep your information so you can receive important updates, invoices, information regarding your child and Funclub by email and Famly. We will keep your information secure and will not share it except if required by law to do so. We will not retain information any longer than the legally required timescales. (For more information please contact your manager).

By signing this form you understand the need for us to continue holding and processing your data, and to us sending you information. Should you wish to view your child's file, please see our Access in Information Policy and Confidentiality & Data Protection Policy.

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hild's name
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