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.

		11 Pannal Ash Road,
Also Known As:		Harrogate, HG2 9PH.
Any Previous Names:	Tel: 07882 297737	
Date of Birth:		Managed by: Funclubs Ltd Co reg:8823396
Child's Current Address:		email: rossettacre@funcare.co.uk
		Postcode:
Home Tel:	e-mail address:	
Any Previous Addresses:		Teacher:
		Year:
Details of Parents/Carers & Emerger	ocy 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 med 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 con Agree []	ntacts to supply their personal information.
Authorised names:		
		Password:

2018/19

c/o Rossett Acre School

Sessior	ı detail	s:

Requested	Start	Date:		
Requesteu	JIUI	Duie.		

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to pay on time will result in a late payment fee of £5 per child per week overdue, and your child's place may be withdrawn.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:
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 an additional care plan must be completed. Please see the manager for further info.
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.

Please give details below of any of th	e following factors that may be relevant to	your child:
1. Names, roles and contact details of any pr	rofessionals who have contact with your child or fo	amily
2. Any relevant court orders in place includi	ng those which affect any person's access to the	child (e.g. residence order,
contact order, care order, injunction etc.)	Is there any information from these orders that	our setting needs to be aware of
which will help us to care for your child?		
3.Any child protection plan which your child	is subject to?	
4. Any other factors which may impact on t	he safety and welfare of the child?	
Please continue over the page if necessary		
riedse commue over the page if necessary		
Diago tiek ooch statement to sense s	or highlight any permissions not acceptable	to you and buing those to the manager
attention for further information:	r nightight any permissions not acceptable	to you and bring these to the managers
arrennen for farmer information.		
·	•	reparations you do not wish us to use on your child:
Sun Cream (min. factor 30)/Antiseptic Wip	es/Micropore Tape/Plasters/Cold Compresses.	AGREE []
2) Emergency Medical Permission: I confirm	n that in case of emergency, club staff may involve	e Emergency Services i.e. Ambulance. A & E
- •	t you first, but should we have trouble contacting	
immediately). AGREE []		
		Funclub displays onsite and on Famly where other
Functub parents may view. Photos will not be	e publically published without further consent. A	GREE []
4) Outings & Excursions: I confirm that my	child may participate in Outings & Excursions by	transport or on foot on an on-going basis. AGREE []
<u> </u>	·	and/or on paper for up to 21 years for the sole use
	equirements. I will keep the club informed of our	most up-to-date information at all times. AGREE
0		
6) Sharina Information with other Professi	onals: T give permission for the club to seek or sh	are any relevant information pertaining to the care
of the child with other professionals involve		a. o a.,, . o.o.a,, oapoag .oo aa. o
I confirm that the above infor	mation is correct and that I have read ful	lly this form and information leaflet. I
understand that a full set of Functi	ıb policies and procedures are available at	anytime for me to refer to and I agree to
со	mply with the terms and conditions set ou	t therein.
Signed:	(Parent/Carer)	Date:
Signed:	(Parent/Carer)	Date:
orgined	(rureni/curer)	Dule

Date:____

Signed:_____(for Funclub)

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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NAME
CHILD'S NAME
DATE