ENROLMENT FORM/CONTRACT 2022/23

Oatlands Juniors

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.

Password

c/o Oatlands Junior School Beechwood Grove, Harrogate, HG2 8QP Tel: 07305 791327

Child's Current Full N	Name						
Also Known As							
Any Previous Names							
Date of Birth				Gender			
Teacher				Year			
1 st Language				2 nd Languag	e		
Child's Current Addre	ess				Post	Code	
Any Previous Address	s				 		
					Post	Code	
Home Telephone Num Email of Main Contac Famly login							
Additional Email for Login (if required)	Famly						
Details of Parents/(Carers & Em	ergency Conto	acts				
Details of Parents/C		ergency Conto	1	onal Emergen Contact	су	Addit	ional Emergency Contact
			1	_	псу	Addit	- -
Name(s)			1	_	ıcy	Addit	- -
Name(s) Relationship Parental			1	_	псу	Addit	
Name(s) Relationship Parental Responsibility? Address (if different from above)			1	_	псу	Addit	
Name(s) Relationship Parental Responsibility? Address (if different			1	_	асу	Addit	
Name(s) Relationship Parental Responsibility? Address (if different from above)			1	_	асу	Addit	
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel			1	_	асу	Addit	- -
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel Work Tel	Main You authorise to a	contact collect your child an	Addition thorised pers	supply a passwor	rd for u	se in the ev	Contact ent that an unauthoris
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel Work Tel Mobile ease confirm below whom yerson is required to collect	Main You authorise to a Your child. If you person brings so the child.	contact collect your child an ou wish for an unaume form of photo It	Addition thorised person to prove the	supply a passwor son to collect you eir identity.	rd for us	se in the ev we do insis	ent that an unauthoris

Health & Welfare Information

Any known allergies/illnesses

Any additional needs/cultural /dietary requirements			
Is the child on the SEN register? Please provide further details			
		must be available at Funclub at all times the chi ust be completed. Please see the manager for furt	
Child's Doctor's Name			
Doctor's Address			
Doctor's Phone Number			
Please give details below of	f any of the followin	ng factors that may be relevant to you	ur child:
Names, roles and contact details of who have contact with your child of the Any relevant court orders in place which affect any person's access residence order, contact order, conjunction etc.) Is there any information orders that our setting needs to be will help us to care for your child?	e including those to the child (e.g. are order, mation from these be aware of which		
Any child protection plan which yo	our child is subject		
Any other factors which may impound welfare of the child?	act on the safety		

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.

Session/	'Bool	kina	and	Invoicing	Detail	ls

Required Start D	ate						
lease tick request	ed place req	uirements					
Session		Mon	Tues	Weds	Thurs	Fri	
AM (from 07.30c	ım)						
PM (until 5.30pm)						
LATE PM (until 6	.30pm)						
lease note that we requ asis, subject to availabi Payment Terms: Invoic	lity. Holiday car	re will be booked se	parately. Fees will b attendance	e charged for all b	ooked term time ses	sions, regard	dless o
poking or on receipt of		to pay on time will		ent fee of £5 per o			
Bill Payer Name(s	5)						
Bill Payer Email							
First Aid: We occasiond to use on your child: Sur Emergency Medical Per Ambulance, A & E Depar	n Cream (min. fac mission: I confir	ctor 30)/Antiseptic rm that in case of em	Wipes/Micropore Tap nergency, club staff n	pe/Plasters/Cold Com may involve Emergenc	npresses. y Services i.e.	Agree Agree	
would allow us to start t	reatment immed that photos may	liately). be taken of my child	d. Photos will only be	used for Funclub disp	plays onsite and on	Agree	
Famly where other Functions & Excursions: I going basis. This is main	Confirm that m	y child may participa	ite in Outings & Excu	rsions by transport o		Agree	
Data Protection: I give years for the sole use or up-to-date information	permission for t f the club admin	he Funclub to store 1	my information electr	onically and/or on pa		Agree	
Sharing Information wi pertaining to the care o This includes during so	i th other Profes f the child with	other professionals	involved with the chil	d and/or family. ´		Agree	
confirm that the above procedures is ava			have read fully this to and I agree to co				
	Signed			Printed		Date	
Parent/Carer 1							
			İ				
Parent/Carer 2							

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.