ENROLMENT FORM/CONTRACT 2022/23

The relationship between a child's parents and a setting is crucial to the child's wellbeing. 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.



c/o St Peter's CE School Belford Road, Harrogate, HG1 1JA Tel: 07771 867641 e-mail: stpeters@funclubs.co.uk

Child's Current Full Name		
Also Known As		
Any Previous Names		
Date of Birth	Gender	
Teacher	Year	
1 st Language	2 nd Language	:
Child's Current Address		Post Code
Any Previous Address		
,		Post Code
Home Telephone Number		
Email of Main Contact for		
Famly login		
Additional Email for Famly		
Login (if required)		

Details of Parents/Carers & Emergency Contacts

	Main contact	Additional Emergency Contact	Additional Emergency Contact
Name(s)			
Relationship			
Parental Responsibility?			
Address (if different from above)			
Home Tel			
Work Tel			
Mobile			

Please confirm below whom you authorise to collect your child and in addition supply a password for use in the event that an unauthorised person is required to collect your child. If you wish for an unauthorised person to collect your child we do insist that you let us know in advance and that the named person brings some form of photo ID to prove their identity.

I understand that is my responsibility to have obtained consent from all emergency contacts to supply their personal information. $AGREE \Box$

Authorised Names (in addition to those given in Contacts)	
Password	

Health & Welfare Information

Any known allergies/illnesses

Any additional needs/cultural /dietary requirements			
Is the child on the SEN register? Please provide further details			
		s must be available at Funclub at all times the child atten nust be completed. Please see the manager for further info	
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 your child	d:
Names, roles and contact details of who have contact with your child of 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		
<u> </u>	·		

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						
ease tick requeste	ed place red	uirements					
Session		Mon	Tues	Weds	Thurs	Fri	
AM (from 07.30c	am)						
PM (until 5.00pm)						
LATE PM (until 6	.00pm)						
lease note that we requasis, subject to availabil Payment Terms: Invoic poking or on receipt of	lity. Holiday car es will be issue	re will be booked se d via email and are	parately. Fees will b attendance payable in advance o	e charged for all bo of attendance. Addit	ooked term time ses	sions, regarc aid for at tir	lless of ne of
			ace may be withdrav		·	· 	
Bill Payer Name(s	5)						
Bill Payer Email							
Updates to policy ar First Aid: We occasiona to use on your child: Sur	ally have to admi n Cream (min. fa	nister first aid to th ctor 30)/Antiseptic	e children, please de Wipes/Micropore Tap	ete any preparations pe/Plasters/Cold Com	you do not wish us presses.	Agree	nf.
Emergency Medical Per Ambulance, A & E Depar would allow us to start t	rtment. (We will	always aim to contac				Agree	
Photographs : I confirm Famly where other Func						Agree	
	Outings & Excursions: I confirm that my child may participate in Outings & Excursions by transport or on foot on an ongoing basis. This is mainly during school holiday periods if attending our holiday club.						
Data Protection: I give permission for the Funclub to store my information electronically and/or on paper for up to 21 years for the sole use of the club administration & the club legal requirements. I will keep the club informed of our most up-to-date information at all times.							
Sharing Information with other Professionals: I give permission for the club to seek or share any relevant information pertaining to the care of the child with other professionals involved with the child and/or family. Agree This includes during school holidays if attending our holiday club from a different Functub setting.							
confirm that the above procedures is ava					d that a full set of F s and conditions set		es and
	Signed			Printed		Date	
Parent/Carer 1							
Parent/Carer 2							
For Funclub							

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.