



After School Care Registration Form at Kerr Mackie Primary School

Children details

Child's name		D.O.B.	
School Year, Class & Teacher		Address	
Start date with after school care		Home tel no:	
First language		Email address:	

Any additional comments that you feel we may need to know:

Parents/Carers contact details

Name & Address	Place of work	Mobile number	Work telephone number

Which of the above have parental responsibility?

Emergency contact details (other than above)

Name & address	Relationship to child	Place of work	Mobile number	Work & home telephone number

Attendance required for (please tick)

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

Payment method (please circle)

<u>Standing Order</u> Please set up payments to be due on the 1 st of each month	<u>Voucher</u> Please detail	<u>Cash</u> £3.50 admin charge per month	<u>Cheque</u> £3.50 admin charge per month
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Receipts will be made for Cash and Cheque payments.

Medical authorisation		
Do you give permission for your child to receive emergency treatment?	Yes	No
Would you allow us to administer First Aid?	Yes	No
Does your child have any allergies/special requirements or food restrictions? If yes, please specify below.	Yes	No
<p>Please note: Only prescribed medicines can be administered by staff. All medicines must be clearly marked with the child's NAME, PRESCRIBED DOSAGE and DATE OF PRESCRIPTION.</p> <p>All medicines MUST be brought in on a daily basis and SIGNED for by PARENT/CARER and staff.</p>		
Child's Doctor name and address	Doctor's telephone number	
Other authorisation		
Would you allow photos of your child to be taken for display in the setting?		
Would you allow your child to have their face painted?		
Terms and conditions		
<p>This form constitutes an agreement between the Parent/Carer named overleaf and Child Seasons. By signing this form you agree that you have read and understood the terms and conditions of service on this form and as follows:</p> <ul style="list-style-type: none"> • Give 4 weeks' notice in writing via email of my child's leaving date or payment in lieu • Give 4 weeks' notice in writing via email to cancel any days • Give 1 weeks' notice in writing via email to swap any days • Pay full payment in case of illness/absence and teacher strikes • Pay full payment in case of bad weather conditions (e.g. heavy snow etc.), evacuation of school premises • Once any childcare is booked, it is liable for payment • Bounced cheques will be charged at £8.00 • Late collection of child will be charged at £2.00 for every five minutes • Please remember to inform any member of staff of any changes to this registration form. • An admin fee will be charged at £3.50 for any letters required such as Tax Credits & Housing Benefits <p>In case of non-payment, your child's place will be withdrawn after one month's non-payment, unless alternative arrangements have been made with the Managers. It is the policy of Child Seasons to pursue all unpaid fees through an appropriate debt collection agency to recover the service's money. All third party costs will be payable by the Parent/Carer.</p>		
Parents signature: Please remember this is a binding contract so please read carefully before signing	Date:	

Please note: All information provided to Child Seasons will remain totally confidential. Copies of Policies & Procedures will be displayed on the notice board within the setting.