

Martley & District Out of School Care.

Admission Form.

Child's name.....

Date of Birth.....

Home tel. no.....

Mobile tel. no.....

Home address.....

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Name, address & tel. no. of person to be contacted in your absence, in case of emergency:

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.....

Doctor: (name & tel. no.).....

Are immunisations up to date? Yes/ No

Medical history inc. Allergies/ Medication/ Dietary requirements?

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Declaration.

1. I agree to my child being taken directly to hospital or to being seen by the nearest doctor available, should an emergency arise
2. I understand that my child will not be admitted to Out of School clubs if he/she is unwell
3. I agree to a trained first aider treating my child if emergency aid is required
4. I understand that if my child brings toys/belongings into an Out of School Club, they do so at their own risk.
5. I understand that I will be billed for the place I book for my child. I will not be billed for their place whilst on holiday, if two weeks notice is given. Late collection (after 6pm) will result in a fine of £10.00 for every fifteen minutes.
6. I will list below other persons who have parental responsibility for my child.

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Signed.....(print).....Date.....