Weddington Primary School, Winchester Avenue, Nuneaton weddingtonoutofhours@live.co.uk 07952323245

# REGISTRATION FORM



Thank you for your interest in joining Weddington Primary School Out Of Hours Club (OHC).

To complete the registration process, please ensure all sections of the form are filled out accurately and thoroughly. Once completed, return the form along with the £20 registration fee at your earliest convenience to secure your child's place. Without the submission of the completed form, we will be unable to accept your child. Additionally, if your child has any medical or Social, Emotional, and Mental Health (SEMH) needs, we encourage you to discuss these with a member of our staff. This will help us provide the necessary support and accommodations for your child's well-being and ensure a positive experience.

We look forward to welcoming your child to our club.

Thank you for your cooperation,

OHC TEAM

### OFSTED NUMBER: 2634889 CHARITY NUMBER: 1177983

## CONTACT INFORMATION

Weddington Primary School weddingtonoutofhours@live.co.uk 07952323245

CHILD INFORMATION				
Full Name	Preferred Name			
Date of Birth	/ Year Group			
Gender 🔿 Male	(on registering) ————————————————————————————————————			
Name and home address of parent(s) whom child lives with				
Parent email				
	CONTACT INFORMATION			
1.Parent/Guardian Nan	ne			
Main Phone	Work Phone			
Relationship to chilc	1			
Does this parent have p Please note, without par adult. 2. Parent/Guardian Nar	rental responsibility, child cannot be collected by this 🔿 Yes 🔿 No			
Main Phone				
	Work Highe			
Does this parent have pa				
EMERGENCY CONTACT INFORMATION				
an alternative contact.	gency, where the above contacts are not available, please give details of Persons authorised to collect child must be over 16 years of age unless been received from parent with parent responsibility.			
1. Name	Main Phone			
	Alternative phone			
2. Name	Main Phone			
	Alternative phone			
Please sign to consent to the above contacts to collect your child on your behalf.				
Parent Signature				

## LEGAL INFORMATION

### PARENTAL RESPONSIBILITY

Please give details below of any parent(s)/guardian or adult that does **NOT** have legal access to the child

ls the child subject to	🔿 Yes	O No
any legal order?		

lf yes, please give details

### SAFEGUARDING PASSWORD

In line with our safeguarding policy, we require a "password" to be set for your child. This is a unique password for the event of someone else collecting your child. By giving the person your password, you give consent for them to collect your child in your absence or in the event of an emergency. Staff will ask any individual that they have not seen before, to provide the password so please ensure that all adults who will collect your child, are aware of our password system. By providing the password to staff member, this will allow staff to send your child home with this person. Therefore, please ensure that all adults who **CANNOT** collect, are listed in the above section .

Password

I consent to the above details. I will ensure all adults collecting are aware of the password.

Signed

Please ensure this information is kept up to date and speak to a staff member if you wish to change your password at any time of your childs' attendance with OHC.

# PERSONAL INFORMATION

needs or disabilities? Of Yes Of No f yes, please give details Does your child have an Education Yes No Health Care Plan (EHCP) If yes, please give details Does your child have any special dietary needs? Of Yes No If yes, please give details Are there any religious/cultural festivals or celebrations that your child celebrates that you would like us to know about? Where possible, we will include celebrations in OHC. Of Yes No If yes, please give details Of Yes No If yes, please give details Please use the space below to inform us of any other important information that we need		PERS	ONAL DETAILS
If yes, please give details  Does your child have any special dietary needs?  If yes, please give details  Are there any religious/cultural festivals or celebrations that your child celebrates that you would like us to know about? Where possible, we will include celebrations in OHC.  Yes O No  If yes, please give details  What language(s) is/are spoken at home?  Please use the space below to inform us of any other important information that we need	Does your child have any special needs or disabilities? If yes, please give details	() Yes	⊖ No
If yes, please give details	Health Care Plan (EHCP)	() Yes	O No
If yes, please give details What language(s) is/are spoken at home?	dietary needs?	() Yes	O No
If yes, please give details 			-
Please use the space below to inform us of any other important information that we need	lf yes, please give details	() Yes	O No
	What language(s) is/are spoken at	home?	

# MEDICAL INFORMATION

MEDICAL DETAILS				
Name and address of child's GP:				
To your knowledge, are	your child's immunisations up to date?			
() Yes	🔿 No: please explain reason			
	medical needs? Does your child require medication? can only be administered with parent consent, named and labelled by a GP.			
○ Yes, please sp	ecify below 🔿 No			
	Il condition and symptoms. Specify any details of daily care requirements ures in relation to child's medical condition/allergy			
Does your child have an	y allergies and/or food intolerances?			
○ Yes, please spec	ify below O No			
EMERGENCY MEDICAL	CONSENT:			
staff will contact you im immediate medical treat	n an accident/incident whilst at OHC, the manager/delegated member of mediately using the emergency contact details. If your child requires ment before you are able to attend, we require your consent to accept any our behalf. Please read carefully below and sign for consent to do so.			
treatment on my behalf surgical treatment, the u	anager or delegated member of staff to consent to emergency medical if I am unable to be present/on scene. This includes dental, medical, use of anaesthetics or blood transfusion. I also agree to the release of medical information by the GP if circumstances are deemed necessary and			
Sianed	Date			

### PERMISSIONS

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#### Sun protection:

We are unable to apply sunscreen to your child. We therefore advise that you provide a bottle of suncream labelled with your child's name and class in their bag. Your child will be responsible to apply the suncream with adult prompt to do so in summer months.

#### Permission to use large equipment:

In line with Early Years Foundation Stage, the club understands the physical development of children must be encouraged through the provision of opportunities for them to be active, interactive and to improve their skills of co-ordination, control and movement.

Your permission is required for supervised access to large physical play equipment in OHC.

#### Ο I give consent for my child to use large physical equipment

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

#### Consent for photography:

During your child's time in OHC, we may wish to record photographs, film images and audio for evidence of activities. Digital cameras and I-pads are used within OHC to take photos. This is only permitted by members of staff and will solely be used within the setting. Photos may be also used for newsletters, website and display boards. You can ask for access to the photos that involve your child at any time. Please specify below whether you give consent for your child to have their photos taken during their time at OHC. Please specify if you DO NOT give permission for your child's photo to be used on newsletters, website and display boards. This consent will be deemed as permission throughout your child's time at OHC. You may withdraw your consent at any time with written confirmation.

 $\bigcirc$  I give consent for my child to have photos taken and used within the setting

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

I give consent for my child to have photos taken and used on newsletters, websites and display boards within the setting

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

#### Internet and electronic device use:

Please provide consent for your child to use electronic devices and internet access at OHC. This is closely monitored by a staff member at all times to ensure it is used safely and responsibly. Games are monitored and downloaded according to age appropriateness for all children to use.

 $\bigcirc$  I give consent for my child to electronic devices and internet access with adult supervision.

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

### POLICIES

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#### Privacy notice:

At Weddington Primary OHC, we respect the privacy of the children attending the club and their parents/carers. The personal information that we collect about you and your child is only used to provide appropriate care for them, maintain our service to you and to communicate with you effectively. Our legal basis for processing the personal information relating to you and your child is to that we can fulfil our contract with you.

All information that has been provided is kept secure in line with GDPR. Data that is no longer required is erased when your child is no longer attending OHC \*We do retain certain records for set periods of time in accordance with safeguarding and GDPR policies.

We will use the contact details to contact you via phone, Dojo, social media and post so that we can send information about your child, our club and any other relevant information. We pride ourselves in communicating effectively with parents.

We will only share personal information about you or your child with another organisation if we:

- Have safeguarding concerns about your child
- Are required by government bodies or law enforcement agencies
- Engage a supplier to process data on our behalf (e.g. taking bookings online or to issue invoices)
- Have obtained your permission to do so

You have a right to obtain the data we have about yourself or your child and to ask for any errors to be corrected. We will respond to all such requests within one month. You can also request for the data to be deleted, but please note that:

- We will not be able to continue to care for your child if we do not have sufficient information about them
- Even after your child has left our care, we have a statutory duty to retain some types of data for a set period of time in line with safeguarding and GDPR.

If you have a complaint about how we have kept your information secure, or how we have responded to a request to access, update or erase your data, you can refer to the Information Commissioner's Office (ICO).

Please sign and date below to confirm that you have read the conditions of this privacy notice and that all information provided is correct and up to date.

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

If you wish to read any of our policies, please visit our website or ask a member of staff to provide you with a copy.

### POLICIES

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#### Payment policy:

Payment of fees to Weddington Primary Out of Hours Club for your child/children's attendance is charged during term time. Fees must be paid by BACS, cash or childcare vouchers **within 2 weeks** of receiving your monthly bill.

Monthly totals are sent to you via text message at the end of each month. Regular communication will be given to remind you of bill dates and payments. If fees are outstanding for more than 2 weeks, a late charge of £25 will be added to your bill. Therefore, we ask that payment is made promptly.

If paying by BACS or childcare vouchers, please enter your child's name in the reference and where possible, send a screenshot of the payment made.

If you do not make a payment within 2 weeks on more than 1 occassion, OHC may serve notice to terminate your place preventing your child attending OHC. Your child will not be able to attend until the outstanding amounts are paid. The committee will be informed of outstanding fees.

Sessions that are booked in advanced will be charged whether or not your child attends. This includes sickness, school clubs/activities or holidays.

If you wish to cancel a place permanently, a weeks notice will be charged.

If children are collected after 5.45pm when the club closes, there will be an additional charge of  $\pounds 25$  for the first 30 minutes, then  $\pounds 1$  per minute thereafter.

 I have read the terms of the payment policy and agree to pay within 2 weeks of receving my bill. I understand that I will be charged a late fee if I collect my child after 5.45pm and/or make a late payment after 2 weeks.

SIGNED\_\_\_\_\_ DATE: \_\_\_\_\_

#### <u>Universal credits:</u>

For parents/carers who claim universal credits, receipts are issued at a cost of £2 per month in addition to your monthly bill. This is to cover the time for our admin team to complete the relevant information to provide you with a receipt. Please note that this is a lengthy process for staff and cannot always be issued immediately. Where possible, we will issue the receipts within 2 weeks of receiving payment.

If you require further information regarding claim for universal credits, please contact a member of staff.

### REQUIRED SESSIONS

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#### <u>Required sessions:</u>

Please indicate below which sessions you will require for your child to attend OHC. Places cannot be guaranteed due to numbers of attendees in line with our insurance and staffing. Therefore, please allow time for a member of staff to confirm which sessions are available.

Where you are applying for more than one child, please add additional ticks in each box that you require.

Please also indicate if this is a permanent arrangement or if your booking will depend on shift patterns. We politely ask for shift patterns to be emailed in advance to ensure we have availability for your child/children.

Child name(s) \_\_\_\_\_ Year Group \_\_\_\_\_

Date wishing to start Out of hours\_\_\_\_\_

#### Please circle as appropriate:

This is a permanent arrangement / The sessions will vary depending on shifts / This is a one-off booking.

#### Please tick sessions required:

Monday	am	pm
Tuesday	am	pm
Wednesday	am	pm
Thursday	am	pm
Friday	am	pm