



Afterschool Club Registration

Management use only
 Allergies/dietary/medical -
 Yes/No
 Consents given Yes /No

Parents/carers to complete all questions in full and sign

CHILDS INFORMATION

First Name		
Surname		
Date of Birth:		Sex (Male/Female)
Address:		
Family Religion:		
Language spoken at home		Ethnic Origin:
Place of Birth:		Nationality:

PARENT(S)/GUARDIAN(S) INFORMATION

1st Contact Name:		
Relationship to pupil:		Parental Responsibility Y/ N
Address:		
Contact number		
Email address		
Place of work:		
Work telephone Number:		
2nd Contact Name:		
Relationship to pupil:		Parental Responsibility Y/N
Address:		
contact telephone number:		
Place of work:		
Work telephone number:		

OTHER CONTACT (People to contact if parents/guardians are unavailable in cases of illness/accidents)

Emergency Contact Name:		Permission to hold their details (tick)
Relationship to pupil:		
Contact Number		
Password for collection		

	Afternoon session 3.15pm- 5.30pm £15.00per session	Late session 5.30pm - 6pm £5.00 per session
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Consent Form

Medical Consent

As parents/guardians we authorise Bright Little Minds first aid qualified staff to administer a plaster, first aid or to arrange, if necessary, for emergency admission to hospital should the parents or other parent representative be unavailable at the time. Taxi fees where applicable are to be refunded by the parent or parent representative. Yes No

Signed:..... Date:..... Name in full:.....

Sun cream consent

As a parent/guardian we authorise Bright little Minds staff to apply sun cream to my child as a top up during the session. Yes No

Signed Date.....Name in Full

E-mail Consent

We consent to you using our e-mail address to send relevant information and invoices. Yes No

Signed:..... Date:..... Name in full:.....

Outings Consent

As parents/guardians we authorise Bright little Minds to take our child on risk assessed, appropriately staffed outings. Yes No

Signed:..... Date:..... Name in full:.....

Photographs and Video

As parents/guardians we authorise photographs or video to be taken in connection with Bright Little Minds childcare, outings, concerts or Facebook. Yes No

Signed:..... Date:..... Name in full:.....

Fees and Holidays

Late fees

All fees are payable in advance of care, upon issuing an invoice. You are required to pay this within the first 5 working days of invoicing. Late fees of £5 per day will occur if this is not adhered to. There is also a Late collection fee of £5 for first 15 minutes and £1 per minute thereafter.

Increase fees.

Bright little Minds reserves the right to increase fees as and when necessary but will make every effort to give at least 4 weeks' notice.

Notice period

4 weeks' notice, in writing is required for the removal of a child from Bright little Minds; otherwise, parents are liable for a month's fees in lieu of notice.

Absence and holidays

Parents are required to pay in full for any absences during term time including children's annual holidays,

As parents /guardians we acknowledge we have read and accept the terms and conditions regarding Registration, Fees, and Holidays.

Signed:..... Date..... Name in full:.....

Medical Form

Parents/carers to complete all questions in full and sign

Doctor Surgery Address:

Surgery Telephone Number:

Please list any special dietary requirements:

Please list any allergies your child may suffer from.

Does your child have any medical conditions that you believe Bright little Minds Childcare should be aware of, or that could affect your child's time with us?

Additional Information

Are there any professional's involved in your child's development/welfare?

Is there any additional information you wish to share with us concerning your child?

Signed:..... Date:..... Name in full:.....