



## Clarendon Primary School - After School Club (ASC)

### ADMISSION FORM

<b>Child's details:</b>		
Surname:	Forenames:	Male/Female
Date of Birth:	Age on Entry to the ASC: .....years .....months	

<b>Parents/Guardian Home Address:</b>	
Surname:	Surname:
Forename:	Forename:
Address:	Address:
Postcode:	Postcode:
Home Tel number:	Home Tel number:
Mobile number:	Mobile number:
Relationship to Child:	Relationship to Child:
Email Address:	Email Address:
Could / likely to collect child from ASC: YES / NO	Could / likely to collect child from ASC: YES / NO
Which parent does the child normally live with?	
Who has legal contact with the child?	
Who has parental responsibility for the child?	
Who has permission to collect your child from the ASC without prior discussion with yourself?	

<b>Parents/Guardian Work Places:</b>	
Name:	Name:
Company name:	Company name:
Company address:	Company address:
Postcode:	Postcode:
Work telephone number:	Work telephone number:

<b>Emergency Contacts (<i>Different to Parent / Carer details</i>)</b>	
Please give details of the person/s who can be contacted in the event of an emergency. (These people will be contacted if / when parents are unavailable or cannot be contacted)	
1. Surname:	2. Surname:
Forename:	Forename:
Address:	Address:
Postcode:	Postcode:
Telephone number:	Telephone number:
Relationship to child:	Relationship to child:
Password to be used when collecting child:	Password to be used when collecting child:

**Important medical information:**

Doctor:

Address:

Postcode:

Telephone No:

Does your child have any medical conditions we should know about? YES / NO

If YES so please describe:

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Details of any allergies / dietary needs:

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**Additional Information:**

1. If required, I give permission for my child to be supported with the application of sun cream? YES / NO
2. If required, I give permission for my child to be given Calpol? YES / NO
3. I give permission for photographs to be taken of my child whilst taking part in ASC activities? YES / NO
4. I give permission for photographs of my child to be used for school displays? YES / NO
5. I give permission for photographs of my child to be used on the school website? YES / NO
6. I give permission for photographs of my child to be published in the local press? YES / NO

Signature of Parent/Guardian:

Dated: