Muskateers After School Activity Club

For Laughter Fun and Cheers, Come and Join the Muskateers!!

# CHILD REGISTRATION FORM

**Please complete in BLOCK CAPITALS and return to the reception at Bitterne C of E Primary School. Please note that your child cannot attend the club until this form has been fully completed and returned.**

**CHILD’S DETAILS:** 

Surname:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Forenames: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Teacher and Details of Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDICAL DETAILS:** 

Doctors Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Surgery Tel Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Surgery Name & Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Known Medical Problems: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Regular Medication Req’d: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Known Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Diagnosed/Undiagnosed Special Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any Additional Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Dietary Requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Languages Spoken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COMMUNICATION**

If you have completed either the Diagnosed/Undiagnosed Special Needs or Additional Needs section above, could you please complete the additional needs form provided. In addition by completing this section you are confirming that you agree for us to liaise with the school prior to your child joining Muskateer's, to discuss their needs in order for us to assess that we can completely support your child within the setting.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If we notice any changes in a child’s wellbeing, then on occasions we do liaise with the teachers and Senior Leadership team within the school regarding this to assess whether anything has happened within the school day that has impacted on the child. This ensures that if any child requires any support then we can assist with their needs and continuity of care. Could you please sign below to confirm that you agree for us to liaise with members of the school team.

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Print Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDICAL EMERGENCIES:** 

Should the emergency contacts not be available in the case of a medical emergency, I hereby authorise a member of staff to sign any consent forms required by the hospital or other medical authorities (this would only be necessary if the delay in gaining your signature endangered your child’s health). Could you please advise us of any specific wishes regarding your child’s treatment either on religious or personal beliefs.

Signed……………………………………………………… Dated……………………………….

**HEALTH ISSUES:** 

I hereby give permission for staff, with the relevant first aid training, to give first aid treatment to my child in the event of an accident.

Signed……………………………………………………… Dated……………………………….

**PLASTERS:** 

I have no knowledge that my child has an allergic reaction to plasters and I give my permission for plasters to be applied to my child where necessary.

Signed…………………………………………………….. Dated……………………………….

**OR**

Only………………………………………………………. (Make) of plasters maybe applied

Signed…………………………………………………… Dated……………………………….

**CONTACTS:** 

Main Contact 2nd Main Contact (i.e. Spouse/Partner)

|  |  |
| --- | --- |
| Parent/Carer: Mr/Mrs/Ms/Miss/Other  | Parent/Carer: Mr/Mrs/Ms/Miss/Other  |
| Forename:  | Forename:  |
| Surname:  | Surname:  |
| Address (If not home address of child overleaf)      | Address (If not home address of child overleaf)      |
| Post Code:  | Post Code:  |
| Tel Nos:  | Home:  | Tel Nos:  | Home:  |
| Mobile:  | Mobile  |
| Email Address  |   | Email Address  |   |
| Work: Please state days/hours worked) Company Name and Address:    Tel No:  | Work: Please state days/hours worked) Company Name and Address:    Tel No:  |
| Priority to contact for collection in emergency, 1st 2nd 3rd 4th  | Priority to contact for collection in emergency, 1st 2nd 3rd 4th  |
| Parental Responsibility: Yes / No   Relationship to Child:   | Parental Responsibility: Yes / No   Relationship to Child:   |
| Please attach a copy of any court orders relating to your child. Please tick if attached  | Please attach a copy of any court orders relating to your child. Please tick if attached  |

Other Persons Authorised to collect child from club/Emergency Contacts

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No  | Name and Relationship to the child   | Priority to contact in an emergency  | Parental Responsibility  |  | Daytime address and telephone number (if same as home address please write home)  |
| 1  |   |  1 2 3 4  |  Yes/No (Delete required)  | as  | Address:   Phone:  |
| 2  |   |  1 2 3 4  | Yes/No (Delete required)  | as  | Address:   Phone:  |

**COLLECTION PROCEDURE**

For Security purposes, your child will only be released into the care of persons listed above, unless advance notice is given in person or by telephone from the child’s main parents/carer. All adults collecting children must be over the age of 18 years, if your child is being collected by someone younger, e.g. a sibling, (who must be of at least Senior School Age), you must notify us in writing or via a text prior to the collection.

**Please provide a password, which all persons collecting your child from club should be aware of, so we can verify the identity and authorisation of the person if they are not known visually to us.**

**Password\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**ATTENDANCE INFORMATION:**  

Please tick to indicate which days you would like your child to regularly attend the club. Some flexibility may be available from week to week, depending on the take up of places. Please ask the club Co-ordinator for details if required.

**Monday Tuesday Wednesday Thursday Friday**

Start date required: …………………………………………………………………………………

**PARENT’S/CARER’S PERMISSION:** 

Parent’s/Carer’s are asked to tick the relevant box for each activity proposed. Parent’s/Carer’s wishes will be respected at all times.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Face Painting | i  | Yes No  | Use of your child’s photograph for hard copies of club promotions and publicity  | i  | Yes No  |
| Body Painting (on the hands, arms or feet)  | i  | Yes No  |  Photographing of your child for the club’s portfolio and activities | i  | Yes No  |

**DECLARATION/AGREEMENT OF PARENT/CARER WITH LEGAL RESPONSIBILITY:** 

I declare that I have legal responsibility for the child detailed above and that all the information I have provided is correct to the best of my knowledge at the time of completion. I agree to notify the club of any change in my child’s circumstances or details. The club will not be held responsible for any incidents or issues arising due to the club not being given up to date and correct information.

I agree to adhere to the clubs policies and procedures which are available to be viewed during the clubs opening times.

I also agree to pay my monthly fees by the set time given on the invoice along with any others fees incurred as detailed in the parents information pack and policies. These fees include amongst others: late collection, late payment and notice period fees.

**You are required to give one month’s written notice if you no longer need a place for your child or wish to reduce the number of sessions your child attends as we allocate resources in advance to accommodate the number of children. All sessions within the one month period will be chargeable.**

**All information provided will be kept in the strictest confidence**

Signature : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Muskateers After School Activity Club

**Oakley John Walk Gate Policy & Procedure**

***Our Club is committed to providing a safe and secure environment for the children in our care. When we have parents/carers/visitors to our club we need to ensure that this will not have a detrimental effect on the children and that the person in question has a valid reason for visiting the club.***

Your child may be collected from Muskateer's After School Club, anytime between 3pm and by the very latest 5.45p.m. Access to the Muskateer's After School Club is obtained via the blue gate in the Oakley John Walk cut way. The gate has a coded padlock on it and the code for this lock and how the lock is operated will be provided to the authorised person collecting upon the first session that your child attends. The code combination for the gate should only be given to persons named as authorised collectors on your child’s registration form. If someone is collecting your child as a one off, please could you provide our telephone number instead and arrange for the person to call us once they are at the gate and then we will let them in. The code for the gate is only to be operated by parents/carers if your child/children are attending a session at the club on that day and, must not be operated by parents/carers on days that their children are not attending the club, nor should it be operated by the children themselves.

Below is our Policy and Procedure for the Padlocked Gate for access and exit of the Muskateer's After School Club. Can you please ensure that you clearly read it and relay it to your authorised collectors. Please sign at the bottom to confirm that you and on behalf of all of your authorised collectors will adhere to the procedure at all times.

It is extremely important in order to comply with child safeguarding that the following procedure is followed at all times by person/persons collecting the children from Muskateer’s After School Club. This is also to ensure that an opportunist from the cut way cannot gain access and also to prevent other unauthorised persons entry to the premises as it would only take somebody a couple of seconds to do so.

We can only put these measures in place, it is therefore your compliance and implementation of the following at all times that ensures the safety of your child/ren, along with all other persons, including all the other children on site, and the premises itself. We appreciate that the padlock method may appear time consuming particularly when you are in a rush however, your full co-operation is expected, as we are sure you will understand the difficulties and distress it would cause, particularly to the children, to try and remove any unwanted person(s).

* Upon entry please close the gate immediately and lock the padlock and scramble the code fully
* Upon exit please do not open the gate until you and your children are all ready to leave immediately and do not stand with the gate open for even a small period of time as this could allow unauthorised persons access to the school site. Again, please lock the padlock and fully scramble the code
* Please do not allow, under any circumstances, your child/children to operate the padlock or to view the code, as this code is only to be known by consented persons collecting.
* Please do not let anyone in that you do not know as a regular parent/person collecting. In this event, please put the padlock back on and fully scramble the device and they will then have to open the gate themselves or ring for access. We do ask in this situation should it happen to you, that you do not get upset with the person placing the padlock on the gate as we have a lot of different parents from both KS1 & KS2, so therefore, you may not know who is a parent and who is not, and again you could potentially be allowing an unauthorised person onto the premises. If you do have any issues, please speak to a member of staff rather than get into an altercation with another parent/collector as they are only following our procedure.
* Should any parent/collector witness the padlock being used outside of these guidelines, could they please advise a member of staff so that appropriate action can be taken.
* Can you please ensure that your child leaves the room with you upon collection and does not go into the playground or open the door from the hallway to the playground as again this is to ensure that the door to the outside is fully secure and only operated by staff when allowing people onto the premises.

Failure to comply with the above procedure will result in the following action:

* In the first instance, the person collecting will be respectfully reminded of the procedure
* If subsequent misuse is observed or relayed, then a formal letter detailing the incident will be issued
* If the misuse or procedural non-compliance continues, the parent/carer will be invited to attend a meeting with the Managers of Muskateer's After School Club to discuss the matter in more detail, and until the situation has been resolved, they will need to collect from outside the school office and will have to ring Musketeer's upon their arrival for their child to be brought over. Please note that if this occurs there may be some time delay between ringing and your child being brought over if staff are busy supervising the children or dealing with other matters within the club.

Name of child/children: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Parent/Carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PRIVACY NOTICE:** 

At Muskateer's After School Activity Club, we respect the privacy of the children attending the Club and the privacy of their parents or carers. The personal information that we collect about you and your child is used only to provide appropriate care for them, maintain our service to you, and communicate with you effectively. Our lawful basis for processing the personal information relating to you and your child is so that we can fulfil our contract with you. Our legal condition for processing any health-related information that you provide about your child is so that we can provide appropriate care for that child.

Any information that you provide is kept secure both in hard copy and on a secure database both at the club site and offsite at the registered club business address. Data that is no longer required\* is erased after your child has ceased attending our Club.

We will use the contact details you give us to contact you via phone, email, and post, so that we can send you information about your child, our Club and other relevant news, and so that we can communicate with you regarding payment of our fees.

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

* have a safeguarding concern about your child
* are required to by government bodies or law enforcement agencies
* engage a supplier to process data on our behalf (e.g. to issue invoices)
* have obtained your prior permission.

You have the right to ask to see the data that 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 ask for the data to be deleted, but 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 specific periods of time\* so we can’t delete everything immediately.

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 us to the Information Commissioner’s Office (ICO).

**Please sign and date below to confirm that you have read this Privacy Notice.**

Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*\* We do need to retain certain types of data (such as records of complaints, accidents, and attendance) for set periods of time after your child ceases to be in our care, but we delete as much personal data as we can as soon as possible.*

**ETHNIC MONITORING INFORMATION**

The information requested is helpful in monitoring the effectiveness of our services and is required by Statutory Bodies for statistical purposes only. Any information given is kept confidential.

**Ethnic Origin**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| White  | Black  | Asian/Asian British  | Chinese  | Mixed  |
| British  Irish Any other white background  | African Caribbean Any other black background   | Bangladeshi Indian Pakistani Any other Asian background   | Chinese Any other ethnic background    | Asian & White Black African & White Black Caribbean & White Any other mixed background  |

**What is your religion or belief?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No Religion or Belief  | Christian  | Buddhist  | Hindu  | Jewish  |
| Muslim  | Sikh  | Prefer not to say  |   |   |