

# After School Club Registration Form

## September 2025

No child can be admitted to The Mohair Centre without an up-to-date registration form.

### **CHILD'S DETAILS**

Child's first name:

Date of Birth:

Child's last name:

### **PARENT'S/CARERS DETAILS.**

Name:	Name:
Relationship to the child:	Relationship to the child:
Address:	Address:
Postcode:	Postcode:
Home Telephone No:	Home Telephone No:
Mobile Telephone No:	Mobile Telephone No:
Place of Work:	Place of Work:
Work Telephone No:	Work Telephone No:
<b>Email Address:</b>	<b>Email Address:</b>

**\*\*Please ensure we have an email contact as we send newsletters, invoices and information via email.**

### **EMERGENCY CONTACT DETAILS SHOULD WE BE UNABLE TO CONTACT YOU.**

Name:	Telephone No:	Relationship:
Name:	Telephone No:	Relationship:
Name:	Telephone No:	Relationship:

Please choose a Password in the event your emergency contact needs to collect your child/children: .....

**Who does the child permanently live with .....**

**Are there any contact restrictions for the child: Yes / No (please indicate) .....**

**Which school does your child attend: .....**

**Do they require a booster seat? Yes / No (please indicate)**

**I have read and understood the Transport Policy .....(Please sign)**

**MEDICAL DETAILS**

Doctor's Name:

Surgery Address:

Telephone No:

Known Allergies:

Medical conditions (either diagnosed or awaiting diagnosis):

Special Dietary requirements:

Any Other Information you feel we should know:

We require parental consent. Please sign to give consent.

- In the event of an emergency I give permission for The Mohair Centre to seek urgent medical advice/ assistance.....
- I give permission for The Mohair Centre to keep records about my child .....
- I give permission for the application of sun cream.....
- Fishing (under supervision) .....
- Pony Riding .....
- Using face paints & non-permanent tattoos.....
- I understand medication can only be administered once a medication form has been completed.....

## Digital photograph and film footage permission

I/we give permission for the Mohair Centre to take photographs or film footage, taken on either the dedicated camera or iPad, for promotional use..... and displays on site..... (please tick appropriately).

Please note any photographs or video footage stored electronically will be stored securely.

By law the Mohair Centre is registered with the Information Commissioner’s Office (ICO) as a data controller. For further information please read our full photograph and film footage policy and or visit the ICO website at:

[http://www.ico.gov.uk/what\\_we\\_cover/data\\_protection/notification.aspx](http://www.ico.gov.uk/what_we_cover/data_protection/notification.aspx)

Parent/Carer Name	
Parent/Carer Signature	
Date	

**Please indicate how you will be paying fees: BACS / Childcare vouchers / Government Tax-Free Childcare scheme, if using BACS please ensure that your child is identified on the BACS reference and this is clearly marked ASC.**

**If you will be paying via childcare vouchers which voucher company will you be using? .....**

**Please use the child’s name as a reference when paying with voucher’s or directly into our bank account to help us track payments.**

**I/we wish to register my/our child. I agree once a place has been confirmed for my child, I will be bound by the settings policies, procedures and the terms and conditions of Mohair Centre Ltd as provided in the parent handbook.**

SIGNED..... Parent/Guardian DATE: .....

**Please return the completed form to:**

AFTER SCHOOL CLUB, Mohair Centre Ltd, Brickfield Farm, Lewes Road, Laughton BN8 6JG  
or email: [afterschool@mohaircentre.co.uk](mailto:afterschool@mohaircentre.co.uk)