

Holiday Playscheme Registration Form

May 2024

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:
Email Address:	Email Address:

****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)

.....

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.....
- Being transported in staff cars (with prior notice)
- Do they require a booster seat? Yes / No (please indicate)
- I understand that 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 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

Parent/Carer Name	
Parent/Carer Signature	
Date	

Please indicate how you will be paying fees: BACS / Childcare vouchers or cash, 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 The Mohair Centre as provided in the parent handbook.**

SIGNED..... Parent/Guardian

DATE:

Please return the completed form to:

OUT OF SCHOOL CLUB , Mohair Centre, Brickfield Farm, Lewes Road, Laughton BN8 6JG
or email: mohairchildcare@hotmail.co.uk