Woodston Whizz Kids After School



Application Pack

Child's Personal Details

- ❖ Name:
- **❖** DOB:
- Gender:

❖ Home address:						
 ❖ Telephone number: ❖ Religion: ❖ Language: ❖ Emergency contact 1: 						
Emergency contact 2:						
❖ Parents' place of work/phone number:						
❖ Allergies/dietary requirements:						
Sessions required						
Monday						
Tuesday						

Wednesday

Thursday

Friday

- ❖ Fees are charged at £8.00 per session from 3:15pm to 6pm. Payments must be made via ParentPay, in advance.
- If you do not pay and are in arrears by 1 week, we will refuse to accept your child.
- ❖ I hereby consent for my child to take a place at this club according to the terms and conditions set out in its policies and procedures. Please ask staff for a copy. If I am late collecting my child from the 6pm closure time I will be charged a <u>late pick up</u> fee of £1.00 per minute.

In the event that my child may be involved in a serious incident whilst at the club, I expect the manager, or delegated member to the team to contact me immediately on the emergency contact number I have provided.

By	signing	below, I	have given al	I correct in	formation a	bout my child
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Parent signature:

Manager signature:

Consent Form

I give consent to the following:

- ❖ For my child to administer sun cream
- ❖ For my child to watch PG films
- For my child to use face paints
- ❖ For my child to participate in local trips e.g. park.

Parent signature: