



## Kenton Primary Breakfast Club Registration Form

### Child's details

Child's full name \_\_\_\_\_  
Preferred name \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Age \_\_\_\_\_  
Home Address \_\_\_\_\_  
  
Gender \_\_\_\_\_  
Ethnicity \_\_\_\_\_  
Religion \_\_\_\_\_  
Language spoken \_\_\_\_\_  
Class teacher \_\_\_\_\_

### Parent/ carer and emergency contacts

Parent/Guardian's name \_\_\_\_\_  
Home phone number \_\_\_\_\_  
Work phone number \_\_\_\_\_  
Mobile \_\_\_\_\_  
Parent/ Guardian's place  
of work \_\_\_\_\_  
Other emergency contacts - names and contact numbers  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Adults authorised to collect in the event of an emergency ( must be over 18 year of age)	
Name and contact no.	_____
Name and contact no.	_____
Name and contact no.	_____

### Medical details and other needs

Doctor's Name \_\_\_\_\_  
Surgery phone number and address \_\_\_\_\_

Details of significant health issues including any physical disabilities  
statements

Details of any Special Educational Needs

Any special dietary requirements or allergies

Any non-dietary allergies

#### Declaration

I hereby consent for my child to take up a place at the Kenton Primary Breakfast Club, according to the terms and conditions set out. I have read the terms and conditions of Kenton Primary Breakfast Club and agree to follow its policies and procedures.

I confirm that the above information is correct and I will undertake to inform the Play Workers as soon as any details change.

I consent to any emergency medical treatment necessary during the running of the club. I authorise the play/ care staff to sign any written form of consent required by the hospital authorities if the delay in getting my signature is considered by the doctor to endanger my child's health and safety.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_



### **Kenton Primary Breakfast Club Terms and conditions**

1. All fees must be paid in advance via School Money.
2. A completed registration form must be submitted before a child can be accepted into the club.

3. Parents must ensure that Play Workers are informed in writing of any changes to the registration form as soon as they occur (particularly to changes in emergency contact details).
4. Although a wide variety of activities will be on offer, including the opportunity for children to do their homework, we will not make children take part in an activity that they do not wish to do. We can encourage them to take part - however we will not make any activity compulsory. The emphasis will be on choice and enjoyment.
5. Breakfast will be served until 8.30am.
6. The authorised person who delivers the child to Breakfast Club must sign them in to ensure accurate registration. Authorised people must be over 18 years of age.
7. If your child is ill and unable to attend the Breakfast Club you must inform the Play Workers in addition to the school (01626 890465). In order to meet our duty of care, any child that has a place in a session where they do not appear will be presumed missing and parents/ guardians will be contacted. The staff would be grateful if parents/ guardians could help ensure that this is adhered to.
8. Kenton Primary Breakfast Club reserves the right to exclude any children from the club whose behaviour is disruptive and prevents them from proving a safe, stimulating and happy environment for other children. This option will only be used in extreme circumstances and as a last resort after extensive consultation with parents/ guardians and the children concerned.
9. The club has a responsibility to contact Social Care if we are concerned in any way about the safety of a child. The club has a duty of care for the welfare of the child and maintain strong links with the School, Child Protection Officer and SENCO.

**The emergency contact number for the breakfast Club  
during club hours is 01626 890465**