



# St Andrew's CE Primary School

## Out of School Club

### Child Information



Child's Name	Address	Date of birth
Full Name:		
		Gender

<b>Parent / Carer Name</b>		
<b>Address</b> if different from above		
<b><u>Contact Information</u></b>		If possible, please indicate which is the best number to contact you on
Home telephone number:		
Mobile phone number:		
Work phone number:		
email:		

<b>Parent / Carer Name</b>		
<b>Address</b> if different from above		
<b><u>Contact Information</u></b>		If possible, please indicate which is the best number to contact you on
Home telephone number:		
Mobile phone number:		
Work phone number:		
email:		

**AUTHORISED COLLECTIONS:** In the event of an emergency, when the parent(s) / carer(s) cannot be contacted, please contact:-

<b>Contact Name</b>		
<b>Relationship to your child</b>		
<b><u>Contact Information</u></b>		If possible, please indicate which is the best number to contact you on
Home telephone number:		
Mobile phone number:		
Work phone number:		
email:		

<b>Contact Name</b>		
<b>Relationship to your child</b>		
<b><u>Contact Information</u></b>		If possible, please indicate which is the best number to contact you on
Home telephone number:		
Mobile phone number:		
Work phone number:		
email:		

Who will be the main person collecting your child from the club?

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We will only allow your child to leave the Out of School Club with the above named contacts if we have been informed prior to their collection and if they are able to give us the agreed password:

<b>Agreed password</b>	
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**Health (in case of emergency)** For example, should there be the need to call an ambulance. All Health Care Plan's held within the school will be available to Out of School Club staff.

GP Name, Surgery and Phone Number	
NHS Number	
Details of any health requirements / medical conditions that your child has or has previously had:	
Details of any medication taken on a regular basis:	
A summary of any <b>Allergies</b> .	
A summary of <b>cultural and/or dietary requirements</b> .	
Is there any other information that you feel that we need to be aware of.	

## Consent

I agree to	Please tick
My child receiving first aid treatment in the event of an emergency	
My child receiving medical treatment in the event of an emergency situation needing a hospital visit	
My child receiving the age appropriate dose of paracetamol (Calpol) should they become unwell and we are unable to contact any of the emergency contacts.	
My child having a plaster applied should the need arise	
Provide minimum factor 30 sun cream for my child.	
The use of photographs of my child for display purposes as agreed in the school permission letter (eg display, social media, etc)	

### Safeguarding Children

Please be aware that the Out of School Club will follow the St Andrew's CE Primary School Child Protection and Safeguarding Children Policy. We are committed to safeguarding and promoting the welfare of children and we expect all staff, volunteers and visitors to share this commitment.

### Data Protection Information

We process your data in accordance with the General Data Protection Regulation (GDPR) (Regulation (EU) 2016/679 of the EU) and Data Protection Act 2018. For information, please see the Information Management Policy on Our School Website.

I have received and read the St Andrew's Out of School Terms and Conditions and agree to them.

The information provided is as accurate and up to date as possible at the time of completion. Should details change, I will inform St Andrew's School as soon as possible.

Signed	
Name	
Date	