

Welly Extra (out of school care) Registration Form

Child's First Name:	Child's Last Name:
Child's Date of Birth:	

Name of First Parent / Guardian	Name of Second Parent / Guardian	
Contact Email Address:		
Name & Contact Number of Primary Parent / Guardian Available During Welly Extra Hours:		
Name:		
Home:	Mobile:	Work:

Emergency Contact Details:	
1 st Contact Name:	Telephone (Home):
	Telephone (Mobile):
2 nd Contact Name:	Telephone (Home):
	Telephone (Mobile):

For Welly Wallabies after school care:

Please provide the full names of up to 5 nominated persons who may collect your child if it is not the parent (e.g. childminder, grandparent). You must contact Welly Extra if these details change, or if someone other than the parent or nominated person is going to collect your child.

1. Relationship to child:.....
2. Relationship to child:.....
3. Relationship to child:.....
4. Relationship to child:.....
5. Relationship to child:.....

Please provide a **PASSWORD** that can be given to Welly Extra staff on collection of your child. It is parental responsibility to ensure that the nominated person picking up the child knows the password.

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Name, Address & Tel Number of Child's Doctor:	Medical Conditions / Allergies / Special Dietary Needs*: Please note that children will have access to a choice of breakfast and snacks at Welly Extra. Please see breakfast and snack menus for Welly Extra and inform us if any options are NOT suitable for your child
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Please give any other information you feel we should know about your child:

Statements:

I wish to register my child for Welly Extra.

Signed: Date:

I confirm that my child may take part in all activities.

Signed: Date:

I confirm that my child may play on the equipment in the playground during their time at Welly Extra.

Signed: Date:

I confirm that I am happy for my child to taste or explore foods (during Welly Wallabies).

Signed: Date:

I confirm that I am happy for my child to be accompanied to the toilet by ONE member of staff if necessary.

Signed: Date:

I agree that I will comply with the Academy's regulations and will arrange for my child to be collected if unwell from Welly Extra and that the guidelines for return to Welly Extra are in line with those of the Academy policy.

Signed: Date:

Photographs & Social Media:

Photographs / video of your child may be used for school displays, websites, advertisements and official social media accounts. We will never name any child shown. If you do not wish your child to be included in photographs or videos, please confirm in writing to the Headteacher.

Confirmation of Details to be updated each term (to be completed on request)

	Signature & Print Name	Date
Term 1		
Term 2		
Term 3		
Term 4		
Term 5		
Term 6		