



The Woodlands Club

Breakfast Club and After School Club at Knowles Primary School
Knowles Primary School, Queensway, Bletchley, MK2 2HB
Telephone: 01908 373588 / Email: thewoodlandsclub@kpsmk.uk

The Woodlands Club Registration Form

Each child who attends The Woodlands Club (Breakfast Club or After School) must be registered. Registration ensures we have essential information about each child including contact information and health information. The registration information needs to be kept up to date and we are asking parents, guardians and carers to update the information for without up to date information about each child we are unable to accept children at the Club.

Please take time to complete this form and read all terms and conditions and return both forms to school as soon as possible. It is important that all sections of the registration form are completed. Please sign and date both the registration form and the terms and conditions.

Please indicate what days a week you will require breakfast or after school care (a rough idea is fine at this point, you will not be charged for any spaces until you have booked them via schoolcomms in September).

	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Club	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After School Club	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parents / Guardians Details:

Title:	
First Name:	
Last Name:	
Email Address:	
Home Address:	
Home Phone:	
Mobile Phone:	



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Work Phone:	
GP's Name:	
Surgery's Address:	

Child/ren's details

	Child 1	Child 2	Child 3
First Name:			
Last Name:			
Date of Birth:			
Dietary Requirements? (please list)			
Any Illnesses or Allergies:			



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Medication: (does the club need to be aware of any medication your child takes?)			
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Emergency Contact Details:

FIRST EMERGENCY CONTACT	
Title:	
First Name:	
Last Name:	
Relationship to Child:	
Email Address:	
Home Address:	
Home Phone:	
Mobile Phone:	
Work Phone:	

SECOND EMERGENCY CONTACT	
Title:	
First Name:	



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Last Name:	
Relationship to Child:	
Email Address:	
Home Address:	
Home Phone:	
Mobile Phone:	
Work Phone:	

THIRD EMERGENCY CONTACT	
Title:	
First Name:	
Last Name:	
Relationship to Child:	
Email Address:	
Home Address:	
Home Phone:	
Mobile Phone:	
Work Phone:	



People authorised to collect child/ren:

Permission Forms:

EMERGENCY MEDICAL ATTENTION:	<input type="checkbox"/> I give permission for my child to be taken to hospital for emergency medical treatment in the event that I can not be contacted Sign _____ Date _____
PHOTOGRAPHS:	<input type="checkbox"/> I give permission for my child to be photographed for display and newsletter purposes within the club and school <input type="checkbox"/> I DO NOT give permission for my child to be photographed for display and newsletter purposes within the club and school Sign _____ Date _____
PLASTERS	<input type="checkbox"/> I give permission for my child to be given a plaster if needed <input type="checkbox"/> I DO NOT give permission for my child to be given a plaster if needed Sign _____ Date _____
FILMS AND TV <i>As a treat we may watch a movie afternoon in The Woodlands Club</i>	<input type="checkbox"/> I give permission for my child to watch U or PG films <input type="checkbox"/> I DO NOT give permission for my child to watch U or PG films Sign _____ Date _____
Calpol in the event of a high temperature over 38°C	<p>In the event of your child/ren getting a high temperature of 38°C or above, the club can provide Calpol following the dose instructions on the box. If we do need to give your child Calpol we still need either phone or email confirmation from you prior to administering Calpol. We can only administer one dose of Calpol and will still require you to collect your child.</p> <input type="checkbox"/> I give permission for my child to be given Calpol



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	<p><input type="checkbox"/> I DO NOT give permission for my child to be given Calpol</p> <p>Sign _____ Date _____</p>
<p>Any other information you wish to inform The Woodlands Club of?</p>	
<p>Agreement:</p>	<p>I confirm that, to the best of my knowledge, the information given on this registration form is correct and that I will provide The Woodlands Club with any updated information as soon as it is available if there is a change of circumstances. I also Understand that The Woodlands Club is not responsible for my child/ren before or after advertised operational times.</p> <p>Sign _____ Date _____</p>