**Little Country Lovers Holiday Club**

**Registration Form and Permissions**

**CHILD DETAILS**

**Child’s first name: Surname:**

**Preferred name:**

**Date of birth: School Year:**

**School attended:**

**First language:**

**PARENT/CARERS DETAILS (1)**

**First name: Surname:**

**Home address:**

**Does this child normally live at this address? Yes / No**

**Home Number:**

**Mobile number:**

**Work number:**

**Email address:**

**Does this person have parental responsibility? Yes / No**

**PARENT/CARERS DETAILS (2)**

**First name: Surname:**

**Home address:**

**Does this child normally live at this address? Yes / No**

**Home Number:**

**Mobile number:**

**Work number:**

**Email address:**

**Does this person have parental responsibility? Yes / No**

**Please provide a password to be used if you child is picked up by anyone other than parents/carers:**

*(n.b. Please make sure that anyone other than parents collecting must be aware of the password as they may be challenged)*

**EMERGENCY CONTACTS**

**Please provide details of at least two people we can contact if we are unable to get hold of you.**

**Please ensure that at least one of your contacts would be available to collect your child should they become unwell or if we need to close suddenly in line with government Covid guidelines.**

Name:

Address:

Telephone number: Mobile number

Relationship to the child:

Name:

Address:

Telephone number: Mobile number:

Relationship to the child:

**YOUR CHILD’S DOCTOR**

Name of Doctor:

Address:

 Telephone:

**GETTING TO KNOW YOUR CHILD**

Please detail any additional/special needs your child has and how we can support them: (please provide full details)

Does you child receive extra support at school? (please provide full details)

Does your child need extra help in anyway? Please advise on how staff can best help them.

Please detail any dietary requirements / food allergies for your child: (please provide full details

Is there anything your child doesn’t like (food, games etc) or is scared of?

What are your child’s favourite activities?

**Signature of Parent/Carer Date of registration**

**PERMISSIONS**

**Photographs:**

**I grant permission for images of my child to be used for the following purposes:**

**( Please delete as necessary)**

**Club Website Y/N**

**Facebook page Y/N**

**Displays showing activities Y/N**

**Promotional materials Y/N**

**Local press Y/N**

**I understand that personal details or names will not be disclosed.**

**I understand there will be no payment for my child’s participation.**

**SIGNED:**

**Farm Chores involving animals**

**I grant permission for my child to assist staff with caring for the farm animals.**

***(children will never enter the pens or touch the animals)***

**Y/N**

**I understand that risk assessments will be undertaken and children will be required to follow a behaviour code around the animals.**

**I understand that children will not be entering pens with the animals.**

**Local Walks**

**I grant permission for my child to go on local walks as part of the daily routines**

 **Y/N**

**SIGNED:**

***Revised January 2023***

**LITTLE COUNTRY LOVERS**

 Parental Agreement

 Child’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent or carer’s name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I consent for my child to attend Little Country Lovers
* I understand that LCL has policies and procedures including our covid guidelines (which are available on the website), and that there are expectations and obligations relating both to LCL and to myself and my child, and I agree to abide by them
* I understand that LCL is a play setting and that whilst my child is there LCL is legally responsible for him/her.
* It is my responsibility to ensure that my child is collected promptly, either by myself or the emergency contact from the registration form, should they become unwell or if we are forced to close.
* My child will be provided with a snack and drink whilst at LCL unless otherwise requested.
* Once my child is handed over to a staff member at LCL he/she will be in the care of LCL until collected and signed out by an authorised person.
* It is my responsibility to keep the manager informed of any alterations to the information regarding my child (eg contact details, medical conditions, etc).
* I agree that my child may take part in farm walks and messy activities while at LCL **(I understand that the children will never enter the pens or touch the animals)**
* I agree that I will provide my child with appropriate clothing to accommodate outdoor activities
* LCL normally closes at 4.00pm. If, due to unforeseen circumstances, I am going to be late, I will contact the manager/deputy as soon as possible.
* If I do not collect my child on time I will pay a charge of £5 per quarter of an hour to cover the costs of the staff who are legally required to remain and supervise my child.
* If I do not collect my child within 30 minutes, and the club has been unable to reach me or any of my emergency contacts, I understand that LCL may follow its Uncollected Children Policy and contact Social Care.
* Whilst LCL tries to ensure the safety and security of items, I understand that they cannot be held responsible for loss or damage to my child’s property whilst attending.
* I have read the club’s Behaviour Management Policy.
* I agree to its terms and appreciate that in some extreme circumstances it may be necessary to exclude my child from the club (if they present a risk to themselves and others) and I will pay for any missed sessions unless otherwise agreed with the manager.
* If there are any accidents or incidents at LCL involving my child, I will be informed.
* If my child has an accident at the LCL , he/she will be treated by a qualified first aider and I will be informed as soon as possible. If my child needs urgent medical treatment and I am unavailable, a member of staff from LCL will sign any consent forms necessary for treatment on my behalf.
* Information held by LCL regarding my child will be treated as confidential. However, in certain circumstances, for example if there are safeguarding concerns, I understand that the club has a legal duty to pass certain information on to other agencies, including Police, Social Care and health care professionals.
* I understand that aggressive and abusive behaviour towards staff, from either children or parents will not be tolerated.
* I agree that I will not use a camera, mobile phone or other mobile device on LCL premises.

I have read and understood the above terms and conditions and I agree to abide by them.

Signed:

Dated: