

Fun Club Registration and Booking Form

If you wish your child to become a member of Fun Club please complete the following information and return to:

Mrs Jan Dorney, Nursery & Fun Club Manager, Birkenhead School

As your child is a member of Birkenhead School, Fun Club has access to your emergency contact details.

Surname of Child	Date of Birth	
Forenames	Class	
Details of any Physical, Educational, Cultural or Behavioural Needs that may need support.		
<p>As Fun Club is a popular service we take bookings in advance and cannot always guarantee a last minute place. Whilst we will make every effort to accommodate children on a weekly or daily basis, we must adhere to regulations and meet the required adult / child ratios. Please complete the following information to book your child into Fun Club.</p>		
Sessions Required (please tick)		
Day	School – 5.00 pm	5.00 pm – 6.00 pm
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
<p>We kindly request that you inform the Fun Club Manager of cancellation before 10.00 am if you do not require that day's session. This will enable us to offer that place to another child. Failure to inform us will result in a charge for the missed session.</p> <p>Bookings / cancellations can be made by telephone on 0151 651 3041</p>		
Name of Parent	Signature of Parent	
Contact telephone number	Date	
PASSWORD:		

All children must be registered before attending; however, registration does not commit you to using the facility.

Fun Club Consent Form

In order that your child is able to participate in the full range of activities available, we would ask you to complete the following information.

**Please delete as applicable*

Consent for Photography & Video

I *do / do not give my consent for my child to be filmed and photographed for the purposes of staff observation and publicity whilst at Fun Club.

Consent for Observation

I *do / do not give consent for my child to be observed by staff in order that they may plan activities to meet my child's individual needs.

Consent for Activities in and Around the School Locality

I *do / do not give consent for my child to use all School facilities and to go for accompanied walks in the immediate locality of the School.

Emergency Medical Consent

I agree to authorise the Fun Club staff to approve such medical treatment for my *child / ward as is deemed necessary in an emergency: this must be on the advice of a qualified medical practitioner.

Name of Child: Date of Birth:

Signed: Date:

Print Name: