



NANSTALLON SCHOOL



Child's Details		
Full Name		
Address		
Details of allergies, dietary requirements or medical conditions		
Contact Details:		
Primary Contact		
Name	Relationship to child	Emergency contact
Email:		
Secondary Contact		
Name	Relationship to child	Emergency contact
Email:		
Declaration and Consent for Emergency Medical Treatment:		
<p>I agree to the staff taking the necessary steps to ensure that my child receives the best and most appropriate care, attention and treatment if an emergency or accident occurs.</p> <p>I understand that the staff will make every effort to inform me of any emergency or accident as soon as possible after the event. I accept that, in my absence, they may have to seek emergency medical treatment, which may include taking my child to the hospital or calling an ambulance and accompanying my child to the hospital in the case of a serious accident or emergency.</p> <p>In the event that I still cannot be contacted and my child requires emergency treatment, I give permission for the registered staff to authorise medical staff to administer essential treatment until my arrival.</p>		
Signed	Printed	Relationship to child

Sessions Required (regular)					
After School	Monday	Tuesday	Wednesday	Thursday	Friday
3:15 – 4:15					
4:15 – 5:00					
Ad hoc:					

I consent for my child to attend 'Go Active' After School Club at Nanstallon School as indicated in the registration form.

I will inform the office / Go Active if I collect my child from school on a day he/she is booked into the after school club.

I will pay promptly for sessions following receipt of an invoice.

The after school club closes at 5.00pm and, if for any unforeseen circumstances, I am going to be late I will let the Go Active staff / school office know as soon as I can.

If my child is not collected by 5.00pm, I will pay a charge of £5 per quarter of an hour to cover the costs of the two staff, who are legally required to stay.

If any child remains after 5.45pm, after doing everything possible to contact parents and emergency contacts, then staff will be legally required to contact Social Services.

Whilst we try to ensure the safety of items, we cannot be held responsible for anything lost or stolen.

Should there be any accidents or incidents during the club that involve my child, I will be informed.

If my child has an accident, then a qualified first aider will treat him/her, and I will be informed of the situation as soon as possible. If there is a situation where my child needs urgent medical treatment, and I am unavailable, a member of staff may sign any consent forms necessary for treatment on my behalf.

Any information and details regarding my child will be treated as confidential. However, there may be times, for example in cases of safeguarding or child protection concerns, when details of my child may be passed on to other agencies.

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

**Signed:**

**Name:**

**Date:**