ENROLMENT FORM/CONTRACT 2024/25

Oatlands Juniors

funciub

The relationship between a child's parents and a setting is crucial to the child's wellbeing. The welfare, safety and protection of your child are at the heart of everything we do. To enable us to make the best provision for your child we are officially required to ask for information to be provided to us. Please understand that there are sound reasons why we are required to ask these questions. We want to help your child to keep safe, it is not just that we are being curious. Thank you for your co-operation.

Password

c/o Oatlands Junior School Beechwood Grove, Harrogate, HG2 8QP Tel: 07305 791327

Child's Current Full N	Name						
Also Known As							
Any Previous Names							
Date of Birth				Gender			
Teacher 1st Language Child's Current Address Any Previous Address				Year			
				2 nd Language			
					Post	Code	
				Post		Code	
Home Telephone Num	nber						
Email of Main Contac Famly login							
Additional Email for Login (if required)	Famly						
etails of Parents/C	Carers & Eme	rgency Conto	acts				
petails of Parents/C	Carers & Eme		T	onal Emerge Contact	ency	Addit	tional Emergency Contact
			T	_	ency	Addit	
Name(s)			T	_	ency	Addit	•
Name(s) Relationship Parental Responsibility?			T	_	ency	Addit	• •
Name(s) Relationship Parental			T	_	ency	Addit	
Name(s) Relationship Parental Responsibility? Address (if different			T	_	ency	Addit	•
Name(s) Relationship Parental Responsibility? Address (if different from above)			T	_	ency	Addit	
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel			T	_	ency	Addit	•
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel Work Tel Mobile ease confirm below whom yerson is required to collect	ou authorise to co	ontact Ilect your child ar wish for an unau	Addition addition thorised pers	supply a passw	ord for us	se in the ev	Contact Vent that an unauthoris
Name(s) Relationship Parental Responsibility? Address (if different from above) Home Tel Work Tel	ou authorise to co your child. If you person brings some	ontact Ilect your child ar wish for an unau contact of photo Ile	Addition thorised person to prove the	Supply a passw son to collect y eir identity.	ord for us	se in the ev we do insis	vent that an unauthorises that you let us know

Health & Welfare Information

Any known allergies/illnesses

Any additional needs/cultural /dietary requirements			
Is the child on the SEN register? Please provide further details			
		s must be available at Funclub at all times the child atte nust be completed. Please see the manager for further inf	
Child's Doctor's Name			
Doctor's Address			
Doctor's Phone Number			
Please give details below o	f any of the followin	ng factors that may be relevant to your chi	ld:
Names, roles and contact details of who have contact with your child of the Any relevant court orders in place which affect any person's access residence order, contact order, conjunction etc.) Is there any information orders that our setting needs to be will help us to care for your child?	e including those to the child (e.g. are order, mation from these be aware of which		
Any child protection plan which yo	our child is subject		
Any other factors which may impound welfare of the child?	act on the safety		

Safeguarding Children Statement: Please note that if we have any concerns about your child's development, welfare or safety, we will speak to you immediately. We are required to keep records of these concerns, and when we feel it necessary the advice of other professionals will be sought (in accordance with our Safeguarding Children Policy and Procedures). All matters will be dealt with in consultation with parents / carers and in the strictest confidence.

Session/Booking and Invoicing Detail	ils
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Required Start D	ate						
lease tick requeste	ed place req	uirements					
Session		Mon	Tues	Weds	Thurs	Fri	
AM (from 07.30a	ım)						
PM (until 5.30pm))						
LATE PM (until 6	.30pm)						
lease note that we requ asis, subject to availabil Payment Terms: Invoic	ity. Holiday car	re will be booked se	parately. Fees will b attendance	e charged for all bo	ooked term time ses	sions, regard	dless of
ooking or on receipt of i		to pay on time will		ent fee of £5 per o			
Bill Payer Name(s	;)						
Bill Payer Email							
First Aid: We occasiona to use on your child: Sur Emergency Medical Per Ambulance, A & E Depar	n Cream (min. fac mission: I confir tment. (We will	ctor 30)/Antiseptic rm that in case of em always aim to contac	Wipes/Micropore Tap nergency, club staff n	pe/Plasters/Cold Com may involve Emergency	presses. y Services i.e.	Agree Agree	
would allow us to start t Photographs: I confirm Famly where other Func	that photos may	be taken of my child				Agree	
Outings & Excursions: I going basis. This is mair	confirm that m	y child may participa	ite in Outings & Excu	rsions by transport o		Agree	
Data Protection: I give years for the sole use of up-to-date information of	f the club admin					Agree	
Sharing Information wi pertaining to the care of This includes during scl	th other Profes f the child with	other professionals	involved with the chil	d and/or family.		Agree	
Confirm that the above procedures is ava					d that a full set of f s and conditions set		
	Signed			Printed		Date	
Parent/Carer 1							
Parent/Carer 2							
					J		

GENERAL DATA PROTECTION REGULATIONS 2018

We are required by law to keep certain information regarding you and your child for statutory and for business purposes. We will not keep any more information than necessary. This information is kept securely on our premises in locked cabinets and only accessed by the Management Team key holders. We will only use your (including your child's) personal information to provide a childcare service to you.

We keep your information so you can receive important updates, invoices, information regarding your child and Funclub by email and Famly. We will keep your information secure and will not share it except if required by law to do so. We will not retain information any longer than the legally required timescales. (For more information please contact your manager).

By signing this form you understand the need for us to continue holding and processing your data, and to us sending you information. Should you wish to view your child's file, please see our Access in Information Policy and Confidentiality & Data Protection Policy.