



Kents Hill Junior School

Admission Form Kents Hill Junior School After School Club

Name of child: Class:

Week Commencing:

I would like to book the following sessions for my child. Please indicate which days your child will be attending by ticking the appropriate box.

	Monday	Tuesday	Wednesday	Thursday	Friday
<i>Approximate time of collection</i>					

Please contact the school by 4pm the day before if you would like to book a place on an ad-hoc basis.

Payments can be made in advance or on the day of attendance by cheque, cash or online using our cashless system.

Please note, that in order to safeguard your child, a password is required for when your child is collected. This will need to be used by whoever is collecting your child.

Please state this password in the box below:



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Data Collection Sheet for After School Club

Please complete and return to the school office

<u>Surname</u>	
<u>Forename</u>	
<u>Chosen Name</u>	
<u>Class</u>	
<u>Date of Birth</u>	
<u>Address</u>	
<u>Post code</u>	
<u>Telephone</u>	
<u>Email</u>	

Please give details of all persons who have parental responsibility and anyone else you wish to be contacted in an emergency. Place them in the order that you wish for them to be contacted in an emergency.

Priority	Name/Relationship	Phone/Mobile	Work Phone
Priority	Name/Relationship	Phone/Mobile	Work Phone
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Any special circumstances we should know about or requests:		
<u>Doctor Name</u>	<u>Address</u>	<u>Telephone Number</u>
Medical conditions/notes		

Signature: (parent/carer)		Date:	
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