



St Joseph's After School Club Registration Form – 2025/2026

Please note that a separate form is required for each child and a new form must be completed at the beginning of each academic year or when a child is newly registered during the year.

Child's Details

Surname	Forename Name known as	Year Group	Date of Birth

Parent/Carer Details (please provide two contact details)

Name	Name
Home Address	Home Address
Telephone:	Telephone:
Work Telephone:	Work Telephone:
Mobile Number:	Mobile Number:
Email Address:	Email Address:

Additional person(s) Authorised to Collect

This person should be local enough to collect by 5.45 (Mon. - Thurs.) 5.30pm Fri. if ASC staff are unable to arrange collection by any parent of a child attending that ASC session. If another person is to collect the child, ASC staff must be informed prior to collection by the parent/carers, either by letter or telephone.

Name	Relationship to Child: Mobile Number:
------	--

Address:
Other Telephone Number:
A collection password (below) must be used. Collection Password:

About Your Child

<u>Health/medical issues (eg Asthma):</u>
<u>Any special dietary requirements:</u>

Days / Sessions being requested; - please circle/delete

Mondays / Tuesdays / Wednesdays / Thursdays / Fridays

Ideal start date -

PARENT/CARER DECLARATION

I/we consent for staff to take my child to the nearest accident and emergency unit to be examined, treated or admitted as necessary.

We understand that the staff will have done their best to contact us and direct us to our child. However if we are unable to pick up our phone/s, messages will be left for us.

I have read and understood the After School Club Policy, Terms and Conditions and agree to abide with them.

Signed (Parent 1) Please print name of signatory
Signatories relationship to child Date

Signed (Parent 2) Please print name of signatory
Signatories relationship to child Date

Please refer to the school's Data Protection policy.

For office use

Date received by ASC : Initial :
