

TOAD HALL HOLIDAY CLUB - CHILD'S PERSONAL INFORMATION

General Information:

Full Name: _____
DOB: _____
Address: _____
Home Tel. _____

Emergency Information:

Mothers Details: _____
Work Address: _____
Work Tel. _____ Mob. _____ Other _____

Fathers Details: _____
Work Address: _____
Work Tel: _____ Mob. _____ Other _____

Does the mother have parental responsibility: Yes (please delete as applicable)

Does the father have parental responsibility: Yes/No (please delete as applicable)

Medical Information:

GP Surgery: _____ Phone: _____
Address: _____
Allergies: _____
Medical Needs: _____
Additional Needs: _____

Other Emergency Contact Information (In the case that we cannot contact parent):

Full Name: _____
Relationship: _____
Address: _____
Telephone Number Home: _____
Telephone Number Work: _____
Mobile Number: _____

Parental Permission:

Permission to use photographs

On occasions photographs taken at the holiday club may be used to reasonably promote or advertise the aims of Toad Hall Nursery Ltd. This could be across a range of media including magazines, posters, brochures and websites, local media i.e. Wokingham Times. Toad Hall Nursery Ltd will not allow any other company or individual to use these images without your prior permission and will take all reasonable steps to prevent unlawful use of the images. Toad Hall Nursery Ltd will own the copyright of any images, prints, negatives produced by the nursery.

I do/do not give (please delete as appropriate) permission for my child's photograph to be used for promotional purposes.

Signed:

Date:

Local Nature Walk/Park

On occasions your child may have the opportunity to go for a local walk and/or visit the local park with the holiday club staff. The manager will have all the details and these will be communicated to you prior to any trip or outing being arranged. They will also ensure that the legal ratios are met at all times and that your child's safety is a priority.

I give/do not give (please delete as appropriate) permission for my child to attend Toad Hall Nursery's planned walks and trips.

Signed:

Date:

Sun Cream Permission

I give permission/do not give permission (delete as appropriate) for holiday club staff to administer/supervise my child applying sun cream (supplied by Toad Hall) to my child when necessary

I will supply the nursery with sun cream of my choice for nursery staff to apply where necessary (Please highlight if this is the case.)

Signed:

Date:

Face Paint

I give/do not give (delete as appropriate) permission for my child to have their face painted during holiday club sessions.

Signed:

Date:

Declaration for Emergencies

I agree to the manager in charge taking the necessary steps to ensure that my child receives the best and most appropriate care, attention, and treatment should there be an emergency or accident in the nursery. I understand that the manager in charge will make every effort to inform me of any emergency or accident as soon as possible, but that they may have to accompany my child to hospital in the case of a serious emergency or accident via ambulance in my absence. I give permission for the registered hospital staff to administer essential treatment until my arrival. If you do not agree with any or all of the above declaration, please do not sign below but make your views known in the space provided and discuss with the nursery manager or deputy manager and they will do their best to accommodate your particular wishes.

Signed:

Date:

I do not agree with the above declaration and would prefer the following procedure to be followed for my child in the event of an emergency: