



## Breakfast/After school club registration form

(One form for each child)

<b>Child's full name</b>	
<b>Name to be used at Walkington Den</b>	
<b>DOB</b>	
<b>Languages spoken</b>	
<b>Name of Primary carer/contact</b>	
<b>Home address</b>	<b>Home number:</b>  <b>Work Number:</b>  <b>Mobile number:</b>
<b>Email Address</b>	
<b>Does your child have any medical needs (allergies/food intolerance/other) or accessibility needs that we should be aware of? If yes, please specify:</b>	

### Emergency contact details

We need to have up to date information so staff know who to contact in case of an emergency. Please provide details of parents/carers, and someone else that we can contact. Parents and carers will always be contacted first, but if we cannot reach you we will contact your other designated carer.

	Name	Relationship to child	Telephone number	Address
Emergency contact 1				
Emergency contact 2				



### **Doctor information**

Please list details of your child's doctor, in case of an emergency:

Doctors name	Address	Telephone number

### **Emergency consent**

Do you consent to your child receiving medical treatment in an emergency, if we cannot reach you? YES/NO

Signature	
Print name	
Date	

### **Photographs**

I DO/DO NOT give my full permission for any photographs to be taken and used on the schools social media platforms:

Signature	
Print name	
Date	

The data being collected, controlled and processed is in line with General Data Protection Regulations (GDPR). The school has a duty to protect this data and to keep it up to date. The school is required to share some of the data with the Education Authority and with the Department of Education.



## **Food preferences**

This is for school information only and will be used to source provisions for the first few weeks of opening. We will not hold your child to this choice. \*Food intolerance/allergies will be catered for. Please cross reference the chart below with your completion of the medical needs section of this form.

**AM-**

**Please tick all that apply \***

Cornflakes	Rice Krispies	Weetabix	Toast
Milk	Orange juice	Blackcurrant juice	Water

**PM-**

**Please tick all that apply \***

Cheese sandwich	Ham sandwich	Jam sandwich	
Milk	Orange juice	Blackcurrant juice	Water

**Snacks**

Nice biscuit	Malted milk biscuit	Banana	Apple	Satsuma