

Highbury Primary School Nursery & Day Care



Registered Person: Mr Ashley Howard
Extended Services Manager: Ms Rebecca Frost

APPLICATION TO JOIN HIGHBURY PRIMARY BREAKFAST CLUB

Child's Name: Date of Birth:
Home Address:
Home Tel No: Mobile No:
Email Address:
Mother's Name: Father's Name:
Place of Work: Place of Work:
Tel No: Tel No:

EMERGENCY CONTACT NUMBERS (DURING BREAKFAST CLUB HOURS)

Name: Name:
Address: Address:
Relationship to Child: Relationship to Child:
Tel No: Telephone No:
Mobile No: Mobile No:

**In the case of none of the above being able to contacted, Social Services will be informed
(THIS IS REQUIRED BY LAW)**

Password:

ADDITIONAL INFORMATION:

Family Doctor:
Address:
Tel No: Health Visitor:

Immunisations up to date: YES / NO

Allergies/Dietary Needs:

Special Needs (ie. Speech/hearing etc.):

Any other requirements we should be aware of (eg. Fears, vegetarianism etc):

Religion: Ethnic Origin:

EMERGENCY MEDICAL TREATMENT

Should a situation arise where your child requires emergency medical treatment to be administered by a paramedic or qualified doctor/nurse, permission must be obtained by the child's parent/guardian. However, if we are unable to contact you, do you give your permission for emergency medical treatment to be carried out?
YES/NO

Parent/Guardian Signature: **Date:**

Do you give consent for staff to:

- Administer paracetamol: YES / NO
- Apply plasters: YES / NO
- Apply sun cream: YES / NO
- Take photos: YES / NO
- Photos for web/prospectus: YES / NO
- Face paint: YES / NO
- Local off site trips: YES / NO

SESSION TIMES AND PAYMENT

Please tick the sessions you require:

	7.30am – 8.40am @ £3.00 (including breakfast)
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

We offer a 10% discount for your second child.

I agree to pay the required amount promptly.

Parent/Guardian Signature: **Date:**

Thank you and welcome to Highbury Primary Breakfast Club

**Dovercourt Road, Cosham, Portsmouth, Hants, PO6 2RZ
Telephone: (023) 9237 5404**