

Registration at Newton Lang Childcare Ltd

Child Details

| | |
|--------------|-------------------------------|
| Forename: | Date Of Birth: |
| Middle Name: | Gender: |
| Surname: | Ethnicity: |
| Known As: | Language: |
| Address: | Religion: |
| Postcode: | Sibling(s) currently at Club: |
| School: | |

Bill Payer Details

| | |
|----------|------------|
| Title: | Home Tel: |
| Forname: | Work Tel: |
| Surname: | Mobile No: |
| Address: | Email: |

Postcode:

Primary Contact

| | | |
|-------------|---------------------------------|---------------------------|
| | Parental Responsibility: Yes/No | Authorised Pickup: Yes/No |
| Title: | | Emergency Contact: Yes/No |
| Forname: | | Relationship to child: |
| Surname: | | Home Tel: |
| Address: | | Work Tel: |
| | | Place of Work: |
| Postcode: | | Mobile No: |
| Other info: | | Email: |

Contact 2

| | | |
|-------------|---------------------------------|---------------------------|
| | Parental Responsibility: Yes/No | Authorised Pickup: Yes/No |
| Title: | | Emergency Contact: Yes/No |
| Forname: | | Relationship to child: |
| Surname: | | Home Tel: |
| Address: | | Work Tel: |
| | | Place of Work: |
| Postcode: | | Mobile No: |
| Other info: | | Email: |

Contact 3

| | |
|---------------------------------|---------------------------|
| Parental Responsibility: Yes/No | Authorised Pickup: Yes/No |
| Title: | Emergency Contact: Yes/No |
| Forname: | Relationship to child: |
| Surname: | Home Tel: |
| Address: | Work Tel: |
| | Place of Work: |
| Postcode: | Mobile No: |
| Other info: | Email: |

Doctor's Details

| | |
|----------------|----------------|
| Name: | Tel: |
| Practice Name: | Emergency Tel: |
| Address: | |
| | |
| Postcode: | |
| Other info: | |

Questions

Dietary

Are there any special dietary requirements? Yes/No
Additional Info (if applicable):

Health

Are there any special Health considerations? Yes/No
Additional Info (if applicable):

Permissions

Are you happy for your child to play outside when it's wet? Yes/No
Additional Info (if applicable):

Do you give permission for your child to ride a scooter without a helmet? Yes/No
Additional Info (if applicable):

Do you agree to your child being photographed during sessions for internal use such as newsletters? Yes/No
Additional Info (if applicable):

May we use your child's image on our website? Yes/No
Additional Info (if applicable):

May we record your child's image on video/webcam? Yes/No
Additional Info (if applicable):

Permissions

Are you happy for your child to appear in the media? Yes/No

Additional Info (if applicable):

Are you happy for your child to watch a PG rated movie (BBFC recommends age 8+) Yes/No

Additional Info (if applicable):

About Your Child

Does your child require a collection from school by us? Yes/No

Special interests, likes: _____

Any dislikes: _____

Favourite toys/games _____

Does your child like messy play?

Do you have any pets?

Your child's position in family: e.g. Youngest of 2, has an older brother etc.

Anything else you would like to add:

FEES

A registration fee is payable of £15 (this is a one off payment) Please payment into the account below:

| | | | | |
|------------|---------------------------------|-------------|---|---------------|
| Account | : Newton Lang Childcare Limited | Bank | : | Barclays Bank |
| Account nr | : 33271269 | Branch code | : | 20-88-13 |
| Reference | : your child's name | | | |

Invoicing

An invoice and confirmation of a reservation will be issued on receipt of your booking form. Once a reservation has been confirmed, no refund will be issued if a session is missed or if it is no longer required. Fees are payable monthly in advance and a weekly late payment administration fee of £5.00 may be charged until such time that payment is received in full.

If you pay by cheque or make direct cash deposits to our account, please add the additional fee below to your payment:

CHEQUE DEPOSITS: £1.05 for each cheque deposit CASH DEPOSITS: £0.85p per £100
Payments made by online banking incurs a NIL charge.

Newton Lang Childcare limited reserves the right to refuse admittance due to non-payment or for any other justifiable reason.

I sign to confirm that all the above information is accurate to the best of my knowledge and agree to inform the Club if any details change.

Name of Parent/Carer:

Signature:

Date:

Please send your completed form to: Natalie Lang, 15 Pellings Rise, Crowborough, East Sussex, TN6 2RZ or email to newtonlangcc@gmail.com or hand in at the breakfast or after school club.