



# HOLIDAY CLUBS



## Enrolment Form

Please complete this form in BLOCK CAPITALS for the person attending.

### Child Details

Name .....

Date of Birth .....

Gender .....

School .....

Current School Year.....

Doctor .....

Surgery .....

Tel. ....

### Parent or Carer Details

Name .....

Address .....

Email .....

Mobile Tel. ....

Home Tel. ....

Work Tel. ....

### Emergency Contacts

We require at least two alternatives to the parent/carer's contact details

Name	Contact Number	Relationship to child
.....	.....	.....
.....	.....	.....

### Medical and Behaviour Information

See separate sheet for medication details:

details:

Please inform us of any relevant medical or behaviour information e.g. allergies, dietary problems, history of difficult behaviour, ADHD, toilet requirements (use separate sheet if necessary).

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I give permission for my child to receive urgent medical treatments YES/NO

If there are any treatments you wish your child not to receive, please specify them here:

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### PARENTAL CONSENT

YES/NO I give permission for my child to be included in promotional photographs (which may be taken at Holiday Clubs).

YES/NO I give permission for my child to be taken between sites (Swallows and Hales) by minibus or on foot.

YES/NO I give permission for my child to participate in swimming sessions.

### Swimming Ability:

- New to swimming
- Swim at least 10m unaided front and back
- Swim at least 25m on front and back and tread water for 2 mins

Signed (Parent or Carer) .....

Date .....

How did you hear about us? Please circle:

Website

School Newsletter

Banner

Recommendation

