

Application for Membership- 2024 - 2025

<mark>You will be invoiced for thi</mark> method: Childcare Voucher	· · · · · · · · · · · · · · · · · · ·				staff know your payment s □ (No cheques or cash sorry)	
Child's full name:						
Address:					Postcode:	
Please tell us where the	child normally l	ives/living	arrangements:			
Is your child in receipt of	of benefit relat	ed free sch	nool meals? 🗆 Do	they have	special educational needs? \Box	
Home telephone number	:					
Email address:						
Emergency password- (emergency. You must in			•	n to collec	t your child in an	
EMERGENCY PASSWO	RD:	Date of I	oirth:	Ag	e:	
Please tick Male:	☐ Female:		nool attended/do ss Name:	ue to atten	d:	
•	r example Rece	ption Class	teacher, Child	lminder or	please inform us of their Nursery), their address or	
Parent/Carer name: (Please circle)		Relationship to Child:		Address: Daytime telephone number(s):		
Parent/Carer name: (Please circle)		Relationship to Child:		Address: Daytime telephone number(s):		
Parent/Carer name: (Please circle)		Relationship to Child:		Address: Daytime telephone number(s):		
Person(s) who will collec collect your child, unless					amed persons below may child, to make an	
alternative arrangement	•					
We recommend that you		•	ı can for conting	jency purpo		
Name:	Relationship t	to Child	Name:		Relationship to Child	
Person(s) <u>NEVER</u> to coll	ect child (Pleas	e see legal	note below)-			
Name:	Relationship t	to child:	ild: Name:		Relationship to child:	
residency orders so ple	to collect thei case provide us	r child if with a cop	ve have Court f by of any releve	Papers to c	lemonstrate any custody or	
Who has legal parental	responsibility	of the chil	d?			
Doctor Surgery:			Doctor's Name:			

Please add any additional information you feel we should know about your child:	
(Please discuss any additional needs with your child's Key Person or a Manager)	

Dietary Requirements:	Please let us know of any allergies
Health/Medical:	A Healthcare plan may need to be created and medical training arranged before children with specific needs are accepted if staff are to carry out certain healthcare
Special Educational Needs (including behaviour)	Our Individual Play Plans help staff and parents/carers to meet the needs of children with any additional needs
Religious/Cultural:	We would like to plan activities around everyone's belief systems to teach respect for all cultures
Other: (Family, food likes & dislikes, phobias, interests & hobbies)	Please tell us more about your child to help us settle them in and to ensure that they are happy in our care

'Wild About Play' is registered with Ofsted. Our Ofsted registration number is RP537586 - We are therefore obliged to follow the relevant Safeguarding and Child Protection Procedures to report any concerns we have about safeguarding children in our care.

'Wild About Play' has a Complaints Policy and Procedure. I understand that any concerns will be brought to the attention of the Manager immediately and that if this does not result in a successful conclusion then an official complaint must be made in writing.

- If my child goes on a supervised trip I will be expected to sign the booking form hence providing consent for the outing.
- I understand that 'Wild About Play' cannot be held responsible for any possessions or valuables belonging to the children, whilst they are attending the Club. It is ideal to leave them at home.
- I agree to abide by the rules and regulations of the Club's Policies and Procedures. I understand that all of the Policies & Procedures are available upon request & some are shown on our website.
- I shall inform the Manager of any changes to the Membership details ie- address, contact numbers etc and any other relevant issues regarding the care and welfare of my child (medical details, custody issues etc) & that any court orders relating to the child/custody shall be shared.
- I understand that withholding any information about my child their welfare, development or needs, may lead to their place being withdrawn from the Club.
- I understand that any changes to my child's allocated place (permanent term time place) should be given in the form of an Amendments & Cancellations form.
- I understand that FOUR weeks paid notice must be given for cancellation of an allocated place.
- I understand that I am expected to work alongside 'Wild About Play' by informing staff/my child's Class teacher of any changes to my child's attendance. (For example, informing staff in good time if my child will not be attending Club for a session or if they are returning after a break)
- I understand that the Club Staff shall collect the children from their schools. I give permission for my child to be collected by 'Wild About Play' staff; I understand and give permission for staff to travel with my child in the following ways -escorted in a taxi, by insured WAP staff in a WAP/staff member's vehicle, on foot or collection by WAP vehicle.
- I understand that this Membership Form must be completed as fully as possible and that Wild About Play must be updated when any of the relevant information changes.

Parent/Carer	Signature:	 рате:
	_	
Parent/Carer	Signature:	 Date:

Emergency Contacts & Consents

<u>Parents/Guardians will be contacted first</u> in the event of an emergency.

Please give at least two <u>ADDITIONAL</u> emergency contacts who are ABLE to collect your child in an emergency.

Please **DO NOT** add a name of someone aged under the age of 18 years old.

	Full name of emergency contact	Relationship to child	Telephone number	Telephone number
1.				
2.				
3.				

Please ensure that you complete the tick boxes for ALL consents. Consent no.1 relates to staff acting as a proxy parent on your behalf.	YES	N O
I authorise the staff of 'Wild About Play' to sign any written form of consent required by the hospital authorities, if the delay in getting my signature is considered by the Doctor to endanger my child's health.		
I consent to my child taking part in hand/face painting. The Club shall inform parents of such planned activities at the time however I understand they may be spontaneously carried out.		
I consent to my Reception Class child being photographed for their paper Play & Learning Diary, Club Photo books and displays inside the Club/on the main notice board at the entrance of the Club in the Ridgewood Centre.		
I authorise the staff of 'Wild About Play' to help my child with putting on their sun cream should they need it		
I give consent for photos of my child playing in group situations being used in Play & Learning Diaries belonging to others.		
I understand that each Reception Class child's Play & Learning Diary may be taken home to share with their parents/carers and shared with their School Reception class teacher		
I consent to my child being photographed for 'Wild About Play' website , Facebook page and for marketing and advertising purposes (No names shall be put alongside photos)		
I understand that the 'Wild About Play' Club staff will use the outside garden on a regular basis and may take my child to the local park . I understand that the work vehicle, a or 7 seater MPV, may be used on school pick-ups and for short local trips. (I understand that there will be a sign on the door to inform me if the children have been taken to the park/within the local area)		
I give permission for my child to be collected from school or transported on day trips by 'Wild About Play' staff; I understand and give permission for staff to travel with my child in the following ways -escorted in a taxi, by insured WAP staff in a WAP/staff member's vehicle, on foot or collection by WAP work vehicles - 7 seater vehicle etc.		
I understand that 'Wild About Play' would like to contact me via my given e-mail address for invoicing and non-urgent issues such as promoting events, Holiday Club, Newsletters and discussing other matters relating to my child's play and welfare (This helps us as a small business, to keep costs to a minimum and in turn, keep your childcare fees as low as possible), I agree to this.		

The 'Wild About Play' sessions that I	After School Club (Broadway & the	After School Club	School Holiday	Inset Days
may use in the future are:	Ridge)	(Other school- please state)	Play Scheme (all welcome)	(Please state which school)
(Please tick)				