

MILL FIELD PRIMARY SCHOOL AFTER SCHOOL FACILITY ADMISSION FORM

Child's First Names Surname

Date of Admission M/F?

Mother's name House telephone No.

Mother's Address

Post Code Mobile No.

Mother's place of work Telephone No.

Father's Name House telephone No.

Father's Address

Post Code (if different) Mobile No.

Father's place of work Telephone No.

If one of the parents is not living in the household, do they have access to the child Y/N?

Paperwork seen Y/N

Which adult has parental responsibility for the child?

Names and ages of brothers or sisters

Ethnic Origin Religion Home Language

Doctor's Name Telephone No.

Medical information/allergies

Tetanus injection Y/N Year

Dietary requirements (medical or religious)

IT IS IMPORTANT TO HAVE A CONTACT OTHER THAN THE PARENTS

Name of emergency contact

Address

Post code House telephone No.

Mobile No. Relationship to the child



Headteacher: Mr Stephen Watkins M.Ed.

Mill Field Primary School, Potternewton Mount, Leeds, LS7 2DR

0113 2620021 www.mfprimary.com head@mfprimary.com office@mfprimary.com

MILL FIELD PRIMARY AFTER SCHOOL FACILITY BOOKING FORM

I would like to request the following sessions for my child to attend the after school facility.
I understand the charge is £10.00 per daily session.

Child's name

Monday

Tuesday

Wednesday

Thursday

Friday

Signed (parent/carer)



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Dear Parent/Carer

AFTER SCHOOL FACILITY AGREEMENT

- I agree that I will have to pay in full for all sessions booked
- If I want to decrease the number of sessions I need to give 2 weeks notice
- I understand that the facility is only open when school is open
- If you are running late, please telephone to let us know
- I understand that if late pick up becomes an issue, then the facility holds the right to withdraw the place with immediate effect
- You need to be aware that if you are late and we cannot contact you or your emergency contact then we would be legally bound to contact Social Care
- You will be asked to declare who will be collecting your child. If there is a change to this arrangement we must be informed
- Money must be paid each Monday in advance for the week. The correct amount of money must be in an envelope with the child's name on. It is possible to pay by direct debit in advance to the following account:

Mill Field Primary School Business Reserve Account

Natwest

Sort Code: 60-60-05

A/C No: 45981809

The following forms must be completed:

- A booking form
- An admission form
- Allergy form
- Emergency medical treatment
- Permission for Internet access
- After school permissions for visits and photographs

Signed (parent/carer)



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Emergency medical treatment

We will always do our best to contact parents/carers if medical treatment is needed. However, if we are unable to contact anyone we need to know what you would want us to do. Please complete one of the sections below.

I agree that my child

.....

Can receive emergency medical treatment if necessary.

Signed (Person with parental responsibility)

I agree to my child

.....

Receiving emergency medical treatment with the following exceptions

Signed (Person with parental responsibility)

I take full responsibility for the consequences of the school implementing my wishes as stated above.



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Please complete the slip below to indicate whether your child suffers from any allergies or illnesses, which we need to be made aware of.

Name of child

My child suffers from the following allergy/ies

My child suffers from the following illness/es

Signed (parent/guardian)

MILL FIELD PRIMARY AFTER SCHOOL FACILITY

I give permission for my child named to be taken out of school on visits arranged by the school.

I understand this permission will last until my child leaves Mill Field Primary After School facility.

I understand that I will always be told in advance when my child is being taken out and the purpose of the visit.

Signed (parent/guardian)

PERMISSION FOR PHOTOGRAPHS TO BE TAKEN FOR PUBLICITY PURPOSES

I give permission for my child named to be photographed for publicity purposes, such as newspaper or magazine articles.

I understand this permission will last until my child leaves Mill Field Primary After School facility

I understand that I will always be told in advance when my child is to be photographed.

Signed (parent/guardian)

I have agreed for photographs to be taken and will choose one of the following options:

Only the photograph can appear in the articles (Signed)

Photograph and first name can appear (Signed)

Photograph, first name and surname can appear (Signed)



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I have read the rules of Responsible Internet use with my child.

PERMISSION FOR INTERNET ACCESS AT MILL FIELD PRIMARY

AFTER SCHOOL FACILITY

PARENT/CARER'S PERMISSION

I give consent for access to the Internet on the terms set out in the letter attached. I consent to the monitoring and auditing of my child's email and Internet Access.

- Signed

- Print Name

- Date

PUPIL'S AGREEMENT

I agree to follow the Rules for Responsible Internet use. I agree to the monitoring and auditing of my mail and Internet Access.

- Signed

- Print Name

- Date