



## Afterschool Club Registration Form

The information you provide will be held by Shannon Family Resource Centre in manual and or electronic format. The information will be processed in accordance with General Data Protection Regulations 2018. Completed forms will be held securely and confidentially.

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Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth \_\_\_\_\_

Emergency contact name: \_\_\_\_\_ Emergency contact number: \_\_\_\_\_

Back up contact name: \_\_\_\_\_ Backup contact number: \_\_\_\_\_

### **As snacks are provided we need to know more about your child;**

Are there any foods your child can't eat? \_\_\_\_\_ Has your child any allergies? \_\_\_\_\_

Is medication required to be taken during the session? \_\_\_\_\_

Child's doctor: \_\_\_\_\_

### **For the safety of the children please note:**

#### **The Afterschool Club operates from 3pm to 4.15pm**

Children must be dropped off and collected at the times stated unless otherwise arranged with the Co-ordinator of the Homework Club.

I will collect (Child's name) \_\_\_\_\_ OR (Child's Name) \_\_\_\_\_ can walk home

I give consent for my child to participate in supervised activities at the Afterschool Club

Parent/Guardian Name (Block Capitals) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I consent to Shannon FRC retaining and using my telephone number for the purpose of sending notifications and information related to Homework Club and other activities of Shannon FRC via text and phone calls.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please let us know if there are any changes to the above information*