

**FIVE-2-EIGHTS AFTERSCHOOL CLUB**

**REGISTRATION FORM**

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| --- | --- |
| **Name of Child:** |  |
| **Age:** |  |
| **Date of Birth:** |  |
| **School Year:** |  |
| **School your Child Attends:** |  |
| **Contact Address:** |  |
| **Parent’s Mobile:** |  |
| **Home Phone:** |  |
| **Alternative Contact in emergencies:** |  |
| **Email Address:** |  |
| **Any allergies we should be aware of:** |  |
| **Any behavioural or medical conditions/ issues we need to be aware of?** |  |
| **What sort of activities would your child like to see at the After School Club?** |  |
| **I am aware that I will need to collect my child at the end of the session at 5 pm** | **Signed:** |
| **Cost per session = £2.50**  **I will ensure that my child brings this to each session** | **Signed:** |
|  |  |

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| --- | --- |
| **Gift Aid Declaration:**  **PLEASE COMPLETE TO**  **HELP US RAISE MORE**  **FUNDS** | If you are a tax payer, then KPC can reclaim 20p from the Inland Revenue for every £1  you give, helping us raise funds for our charity. \*(Please delete the following statement  if it does not apply).  \*I would like KPC to treat all membership payments that I make/made on of after 6 Apr 00 as  Gift Aid donations.  Parental Signature: ………………………………………… Date: …………………………………….. |
| **GDPR:**   |  |  | | --- | --- | | **Data Protection/General Data Protection Regulations**  **Privacy Statement:**   * **We do not forward your personal information to any other party, (except in the case of Safeguarding)** * **Records are retained for 6 years.** * **Generic stats only are kept for funders – eg: Age, Gender** | **Your/your child’s data info is kept on our records for Emergency Contact/to enable us to have records for statistics for funding applications. We may contact you by email/post/phone to update you on any issues with your child/fundraising events, trips, opening etc.**  **Re: Photos/DVDs – are you agreeable to photo’s/DVD footage of your son/daughter (if under 18) being used in publicity for KPC?**  **YES NO** *(Please √)*    **I agree to my information being used as above) and agree to being contacted by phone/email as above and am aware of KPC Privacy Statement:**  **YES NO** *(Please √)*    **Signed/Llofnod: : …………………………………………………** | | |

I am signing below to confirm I/my child(ren) are aware of what KPC expects of members. I am also confirming that I am aware that KPC Youth cannot be held responsible or liable for any loss, damage, or accident howsoever caused either inside KPC Youth Centre or within the outside area of KPC Youth. *We ask that children treat others with respect, and they will receive respect.*

**Signed: ………………………………….. Date: …………………………………..**

***(The aim of this club is a pre-introduction to KPC before your child is able to join at age 8 – we would ask where possible that if they turn age 8 that they then move up to the normal KPC sessions, so that spaces are made available for those who are under 8)***