



Holiday Club Child Information Sheet

Child's Name School child Attends

Parents/Carers/Guardian Name

Does this person have parental responsibility for the child Yes/No

If No, please give details of who does

Emergency Contact

Name Relation to Child
Contact Number
Address.....Postcode.....

Name Relation to Child
Contact Number
Address.....Postcode.....

OTHER INFORMATION: Things we need to know to help us provide continuity of care

Allergies

Has your child ever had an allergic reaction to ANYTHING Yes/No

If Yes please provide full details

Please Tick if your child Tetanus Jab is up to date

Food/Drinks (especially fruit and snacks)

Likes:

Dislikes:

Special Dietary requirements

Activities

Likes

Dislikes

Is there anything they are scared of?

Is English your child's second language? Yes/No

If yes, please give details of their first language

What is the main religion in your family?



Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is in our setting?

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Health

Does your child have any of the following

- | | |
|----------------------------------|--------|
| Asthma/Breathing problems | Yes/No |
| Skin Conditions | Yes/No |
| Hearing Difficulties | Yes/No |
| Sight Difficulties | Yes/No |
| Speech Difficulties | Yes/No |
| Any long term illness/conditions | Yes/No |

If you have answered Yes to any of the above, please give details below.

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Doctors Name.....Phone Number.....
 Address.....

Arrival/Departure

List the names of anyone (other than parents) who will be delivering/collecting your child

1. Name.....Relation to child.....
 Address.....
 Postcode..... Phone Number.....

2. Name.....Relation to child.....
 Address.....
 Postcode.....Phone Number.....

Is there anyone who should not have contact with your child or is legally prevented

Yes/No If yes please give details.....

Anything Else:

Is there anything else you think we should know in order to meet the needs of your child? Or anything you have concerns about.

Rebecca's Out Of School Club

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