



Messing Primary School

Smiley Club

INFORMATION AND BOOKING FORM

Child's Details

Surname		Forename	
Date of Birth		Age	
Any special needs?			

Parent / Guardian Details

(1) Name		Address	
Tel. No		Mobile No	
Email		Work Tel	
Workplace			
(2) Name		Address	
Tel. No		Mobile No	
Email		Work Tel	
Workplace			

Emergency Contact Details (Please provide us with 2 contact details in case of emergency)

Contact 1	Telephone No	Relationship to Child
Contact 2	Telephone No	Relationship to Child

Medical History

G.P		Address	
Phone No.			
Medical Conditions / Sensitivities			

Food – We promote healthy eating at the Clubs. Please could you advise of any intolerances / allergies to food below?

Intolerance / allergies to food?	
If allergy is severe, what treatment is given?	

The responsibility of a child is something we must all share, the children's safety is paramount at all times. The more knowledge we have the safer a child will be. All children must be signed into and out of the clubs by an adult. We will not allow a child to leave the school with an unknown person to us without prior parental consent. Please provide details of people authorised to drop off and collect your child at the end of clubs.

The following people are authorised to drop off and / or collect my child.

Name	Relationship to child
Name	Relationship to child

I give permission for staff to act in loco parentis (in place of parent) and act in the child's best interests in the case of a medical emergency.

Please sign here:.....