## SCOOTERS PLAYCLUB REGISTRATION PACK

"Where Memories are Made"





#### Welcome to Scooters PlayClub!

We are an Ofsted registered play provision which we sisters, Jo Skeys and Em Nash-Lewis established in 2006. Between us, we have many years' experience in the nursing/childcare provision. Six members of staff are employed; two managers, business manager, two play workers and a hardworking administrator! All staff are DBS registered and are all <u>highly qualified</u>, each also holds a paediatric first aid certificate.

Scooters is very much an active play based club, where children aged between 4-15 years of age can come and enjoy lots of activities and fun. Should they so wish, children can choose to relax in our quiet area with soft toys, carpets and cushions.

The club provides a wide range of quality toys, games, books etc and we do have a play console. However, our children are highly encouraged to take part in physical play which builds confidence and self esteem.

There is no limit to their use of a positive imagination!

Scooters staff pride ourselves in the high standard of care we deliver and always remember that the children are there to be kept safe at all times. They are your precious little ones!

Please feel free to pop in and have a chat, our door is always open!

Hoping to see you soon.

Best wishes.

Jo and Em













### File information form

Childs details:				
Surname:				
Forenames:				
Address: -				
<del></del>				
Postcode:				
Home telephone no:	-			
Email address:				
D.O.B:/				
Sex: - Male/Female				
Any special dietary requirements: -				
Religion:				
Any cultural issues that need to be taken into account: -				
Medical conditions/SEND (Please include details)				
Mothers details:				
Name:				
Work telephone no: -				

<u>Fathers details:</u>
Name:
Work telephone no:
Medical information:
Doctors name: -
Telephone no:
Practice name:
Immunizations to date:
Whooping cough: - Yes/No Diptheria/Tetanus: - Yes/No Polio: - Yes/No MMR: - Yes/No
Emergency contacts: (Please complete all 3)
Contact 1: -
Name:
Telephone no:
Contact 2: -
Name:
Telephone no:
Contact 3: -
Name:
Telephone no:
I give consent for any medical treatment to be carried out should it be needed:
Parents/Carers Signature:(Mother/Father/Guardian)
Date:



## Registration/application form

#### Please indicate care required:

After School Club:	Monday	Tuesday	Wednesday	Thursday	Friday
3-4					
3-5					
3-6					

Breakfast Club:	Monday	Tuesday	Wednesday	Thursday	Friday
Without Breakfast					
With Breakfast					

<u>Holiday club: -</u>	
Childs full name: -	
Parents names: -	
Mother:	
Father:	
Address: -	
Postcode: -	

1)Name:
2)
3) Name:
Please specify names of any other person(s) collecting your child: -
Please indicate your chosen password, which will be asked for on collection of your
child: -
Sun cream:
During periods of hot weather, you must provide your child with a clearly names
container of sun cream suitable for your child's skin. You must also provide a named hat
so that he/she can participate in outside activity's
I hereby give permission for Scooters PlayClub staff to apply sun cream if necessary
and in accordance with the manufacture instructions.
Signed:(Mother/Father/Guardian)
Signed (Morner/) arrier/budi diany
Date:
Payment:
I understand that I must give 4 full weeks' notice regarding any permanent change in
care required for any of the above clubs. I understand that all bookings are considered firm and are thus die payable once booked. All fees are to be paid monthly in advance
and are charged by the hour.
Please sign below to acknowledge your agreement to the above and receipt of the terms and conditions set out by Scooters PlayClub.
and conditions set out by occorers hayolub.
Signed:(Mother/Father/Guardian)
Date:

Contact numbers: (Please complete all 3)



## Scooters PlayClub: Parental responsibility form

# Please give name, in full, of parent/parents who have parental responsibility of the named child above:

Name of child:

Name 1:
Signature:
Name 2:
Signature:
Name in full of legal contacts to the child named above:
Name 1:
Signature:
<u>Name 2:</u>
Signature:



## Photographic consent form

I give/ do not give my consent for photographs to be taken at Scooters PlayClub of my child for publicity and also evidence of activity's within Scooters PlayClub
Childs name:
Parents/Carers name: (Mother/Father/Guardian)
Parents/Carers signature:(Mother/Father/Guardian)
Date:
Parental permission for Intimate Care
Should it be necessary, I give permission for: (child's
name)to receive intimate care (e.g. help with changing or following toileting).
I understand thatt staff will endeavour to encourage my child to be independent. I
understand that I will be informed discretely should the occasion arise.
Parents/Carers signature:(Mother/Father/Guardian
Parents/Carers name:(Mother/Father/Guardian)



### Key Worker

Current guidelines from Ofsted state that after-school clubs must provide children with a named keyworker.

As such, your child's keyworker will be:

If you have any queries that you wish to raise regarding the care of your child. Please address these to their keyworker. For any other queries, you are of course able to speak to any other member of staff who will do their best to accommodate you.

Thank you



#### Terms and conditions

Below states Scooters terms and conditions:

- I understand that the Play Workers will take all reasonable care of my child/children.
- I have read, understand and agree to abide by the Policies and Procedures of Scooters PlayClub.
- I agree to abide and support decisions made by Scooters staff regarding persistent bad behavior.
- Will arrange for my child to be collected by 6pm latest.
- For the After School Club if my child is unable to attend a booked session I will notify Scooters as soon as possible and no later then 12 noon on the day concerned.
- For the Breakfast Club is my child is unable to attend a booked session I will notify Scooters as soon as possible.
- I will notify Scooters if someone other than those specified on the registration form is collecting my child.
- I agree to keep my child away form Scooters for a period of 48 hours after a contagious illness.
- I agree to pay for all booked sessions, whether my child attends the sessions or not.
- I agree to pay the agreed fine if I am late to collect my child/ren or if I am late in paying fees.
- I understand that if fees are not paid by the due date, Scooters has the right to refuse admission and or take further action.
- I agree to give 4 weeks notice if I wish to withdraw my child/ren for a booked Scooters session.

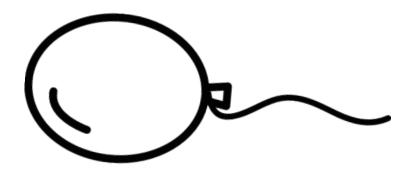
Print Name:		 	
(Mother/Father/	'Guardian)		
Signed:		 	
Date:		 _	

## Scooters All about me sheet (This section is to be completed/filled in by the child)

What is your name?
Do you have a nickname?
Do you have a brother or a sister?
What are their names?
Do you have a pet?
We have lots of toys at Scooters. What do you like to play with at home?

What is your favourite food?

Colour in the balloon with your favourite coloured pens.



Do you like to play outside?
Draw a picture of yourself playing in your garden or at the park.

Scooters has lots and lots of fun and you will be able to make lots of friends. We can't wait to meet you!

See you soon

Χ



### <u>Scooters Pricelist</u> <u>As from September 2021</u>

Breakfast club 7.45am - 8.45am £5 Without breakfast

7.45am - 8.45am £6.00 With breakfast

After-school club 3.00pm - 4.00pm £5

3.00pm - 5.00pm £10

3.00pm - 6.00pm £13.50

Holiday Club 8.00am - 6.00pm £35 per day

Per Hour £4.25

Please call: 07588627801 to book a place.

## With compliments Jo & Em









Friendship Respect Endurance Forgiveness Kindness & Compassion Trust