



**SILVERDALE
PRIMARY
ACADEMY**

Perth Road, St Leonards on Sea,
East Sussex, TN37 7EA

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01424 448100

Principal: Liz Miles



SOS Club Mobile 07808328489

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**End of Day and Holiday Club (SOS Club)
Registration Form 2018**

All children who attend the SOS Club at the Silverdale Primary Academy **MUST** be registered and a completed registration form **MUST** have been returned to the SOS Club Manager.

Please complete one form per family and return to Silverdale Primary Academy. Please print clearly. Please note any emergency contacts or authorised collectors must be over 16 years of age.

Only the people shown on this registration form will be allowed to collect your child unless prior agreement has been made with the SOS Club staff, and the details recorded by SOS Club staff.

Child's Full Name:		Child's Date of Birth:	Child's Class Room:
Gender: *Male/Female			
Parents/Carers Names:		Parental Responsibility:	
Postal Contact Details:			
Home Address:		Home Tel No:	
Postcode:		Mobile Tel No:	
		Email Address:	
Emergency Contact Details:			
Name:	Relationship to child:	Contact Tel Number(s):	
Authorised Collection of Child:			
Name:	Relationship to child:	Contact Tel Number(s):	
My child may travel home without an adult		* Yes / No *Delete as appropriate	
Any person(s) not allowed access to the child:			
Name:	Relationship to child:		
I agree that photographs of my child may be taken during their time at SOS Club and that these photographs may be used for publicity purposes for the SOS Club which at times may include being published in the local Hastings and St Leonards Observer and appear on their and Silverdale Primary Academy websites. Yes No			
Any Dietary Requirements:			



University of Brighton

Academies Trust

Any Allergies: (specific treatment if necessary)
Any Additional/Specific Needs:
Any health problems and/or ongoing medication requirements plus administering details:
(If your child suffers with asthma please ensure they carry their asthma pump with them to SOS Club or leave a spare at SOS Club)
Any other professionals working with your child: (i.e. Speech and Language Therapist)

Signed: Parent/Carer:

Data Protection Act

Personal information that you have provided will be used carefully and may be held on computer systems at the Academy. These uses are personal information are covered by registration under the data protection legislation. Under this legislation you have the right to obtain a copy of the information we hold about you.

**End of Day and Holiday Club (SOS Club)
Request for Place Form
2017-2018**

Name of Child:..... Child's Class:

Name of Child: Child's Class:

Age of Child:..... Date of Birth:

Address:

.....Post Code:.....

Home Tel Number:.....Mobile Tel Number:.....

Email address:

Please mark the sessions you would like with Full (up to 6.00 pm) or Short (up to 4.30 pm) in the table below. If you would like varying sessions please let me know length of session and dates/days required.

Term	Date (Inset days to be decided)	Monday	Tuesday	Wednesday	Thursday	Friday
Term 1	6th September to 20th October 2017					
Term 2	30th October to 20th December 2017					
Term 3	2 nd January 2018 to 9 th February 2018					
Term 4	19 th February to 29 th March 2018					
Term 5	16 th April to 25 th May 2018					
Term 6	4 th June to 20 th July 2018					

Parent/Carers Name:..... Parent/Carer

Signature:.....

