**Application to join**

**The Cabin Crew Out of School Club**

Name of child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Name & address of parent/carer: |
| Postcode: |
| Telephone: |
| Email: |
| Current school/Nursery/other provision: |
| Sidegate class and year group (if your child currently attends Sidegate school): |

DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS (i.e. asthma, eczema or allergies) or need any regular medication? or other IMPORTANT INFORMATION (e.g. dietary requirements or food allergies)

All information will be treated confidentially.

**………………………….............……………………………………………………………………………………........................**

DOES YOUR CHILD HAVE A DISABILITY? If Yes please acquire a support needs form from the club. This is important to ensure your child’s needs at the club are met.

**……………………………………………………......................................………………………………………........................**

I would like my child to start attending The Cabin Crew from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date)

I would like my child to attend the following days/sessions – please DELETE whichever is not applicable:

|  |  |  |  |
| --- | --- | --- | --- |
| **Breakfast Club** |  | **Afterschool Club** |  |
| Monday |  | Monday |  |
| Tuesday |  | Tuesday |  |
| Wednesday |  | Wednesday |  |
| Thursday |  | Thursday |  |
| Friday |  | Friday |  |

Afterschool club pick up time (please DELETE whichever is not applicable): before 4:30pm before 6pm

Privacy Notice

*At The Cabin Crew we take your privacy seriously. We will only use your personal information to manage and maintain tailored care to your child. From time to time we will need to contact you, via phone or email to provide you with club updates and share relevant news. We may also need to contact you in the event of your child becoming unwell. Your data is held securely and can only be accessed by authorised personnel.*

I consent to this information being held on file until a space becomes available or it is no longer needed. If we no longer need the space, we will inform the club as soon as possible.

Signature of parent/carer: Date:

Please return this form together with your £25 administration fee to The Cabin Crew. If a session space is not immediately available, your child’s name will be added to the waiting list for that session and you will be notified as soon as a space becomes available. Thank you.

To pay the £25 administration fee by bank transfer, please use the following bank details:

NatWest Bank - Account name: The Cabin Crew

Account no: 66576865 / Sort code: 53-61-24