

Candystripe Playscheme Registration form 2016-2017

CHILDS DETAIL			
Child's Full Name*		School Attending*	
DOB*		Do you use Candystripe for other services?	
Age as at registration*		Date started Candystripe* Any Additional comments that you feel we may need to know. * <small>This can include allergies or anything medical although this can be listed over the page</small>	
Address & Postcode*			
Home Tel No*			
Mobile Tel No*			
Parent/Legal Guardian Names*		* Compulsory fields that must be completed	
		Email Address:*	

PRIMARY CARER CONTACT DETAILS			
Name*	Address*	Mobile & Work Tel Nos both parents/carers*	Place of Work*

When making a booking for holiday playscheme you need to state full or half days required. For every 10 days booked within the year you can have 1 day half price. This is only redeemable if full days are booked. Prices are subject to change and are correct at the time of print. Please tick the dates you require. Please place a tick for each child in the dates required.

	Monday	Tuesday	Wednesday	Thursday	Friday	
October half term 2016	24 th October	25 th October	26 th October	27 th October	28 th October	Total cost per week
Christmas 2016	19 th December	20 th December	21 st December	22 nd December	23 rd December	Total cost per week
	26 th December	27 th December	28 th December	29 th December	30 th December	Total cost per week
	Closed	Closed	Closed	Closed	Closed	
Spring midterm 2017	13 th February	14 th February	15 th February	16 th February	17 th February	Total cost per week
Easter 2017						
	3 rd April	4 th April	5 th April	6 th April	7 th April	Total cost per week
	10 th April	11 th April	12 th April	13 th April	14 th April	Total cost per week
					Bank holiday closed	
Summer midterm 2017	29 th May	30 th May	31 st May	1 st June	2 nd June	Total cost per week
Summer 2017	Bank holiday closed					
	24 th July	25 th July	26 th July	27 th July	28 th July	Total cost per week
	Limited care	Limited care				
	31 st August	1 st August	2 nd August	3 rd August	4 th August	Total cost per week
	7 th August	8 th August	9 th August	10 th August	11 th August	Total cost per week
	14 th August	15 th August	16 th August	17 th August	18 th August	Total cost per week
	21 st August	22 nd August	23 rd August	24 th August	25 th August	Total cost per week
	28 th August	29 th August	30 th August	31 st August	1 st September	Total cost per week
	Bank holiday closed					
	4 th September	5 th September	6 th September	7 th September	8 th September	Total cost per week
Limited care	Limited care	Limited care	Limited care	Limited care	Limited care	

Payment Methods available (please circle relevant one)

Standing Order. Please set up payments to come prior to start date	Voucher Please detail which voucher co and state clearly playscheme payment	Credit/Debit Card (£3.50 admin charge per receipt)	Cash Please ensure you get a receipt	Cheque (£3.50 admin charge per receipt)
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PLEASE NOTE: Fees are due in advance of use of the playscheme. **A £15 registration fee is due with this form.** You will not have a place until this form is **fully** completed and signed by the person responsible for the bill and you received confirmation from the office. We can ask people to stop using our services if we this form is not completed in full and fees are not paid in full when requested.

Medical Authorisation					
Would you authorise the play leader in charge to sign any written form of consent for medical treatment only if the delay in getting my signature is considered by the doctor to endanger my child's health and safety?	Yes	No	Would you allow us to transport your child by minibus?	Yes	No
Would you allow us to take your child on outings?	Yes	No	Would you allow your child to take part in face painting?	Yes	No
Would you allow us to take photos of your child?	Yes	No	Would you allow your child to participate in a tuck shop?	Yes	No
Do you consent to us holding personal info about you and your child/children?	Yes	No	Do you consent to us sharing info with other professionals e.g. speech therapists and health visitors?	Yes	No
Does your child have any allergy's or special requirements (All information will be treated with strict confidence)					
Can your child use plasters Yes / No					
Child's Doctor Address & Postcode*		Doctors Tel Number*			

Terms and Conditions					
<p>This form constitutes an agreement between the parent/carer named above and Candystripe Inc. By signing this form you agree you have read and understood the terms and conditions of service within this form. A full set of Terms & Conditions are at the clubs and on line at www.candystripeinc.co.uk</p> <ul style="list-style-type: none"> ➤ Pay in full at the beginning of each week for the fees for that week. ➤ Email your booking so it can be confirmed and written onto your registration form and register candystripeinc1@btconnect.com ➤ Give 24 to 48 hours' notice in writing of my child's leaving date or payment in lieu (notice is dependent on reason and is the decision of the manager in charge if to charge) ➤ Pay full payment in case of illness/absence ➤ Pay full payment in case of bad weather conditions (e.g. heavy snow etc) ➤ Once any childcare is booked, it is liable for payment and must be paid according to company policies and procedures details listed above and over the page. ➤ An admin charge of £3.50 will be charged for any changes or letters required (i.e. tax credits etc) ➤ We are an Ofsted registered provider and our registration number is EY299540. <p>In the case of non payment, your childcare will be forfeited after 1 week non-payment, unless alternative arrangements have been made with the Director. Candystripe.inc use a third party agency to collect long term debts older than 3 months and interest may be added to the total owed.</p>					
How did you hear about the playscheme?:					
Word of mouth	Magazine	Referral or recommendation	Flyer / bookbag	Sign outside	Other please state

Parent Signature: <small>Please remember this is a binding contract so please read carefully before signing.</small>		Date:	
Please print name also:			

PLEASE NOTE: All information provided to Candystripe.inc will remain totally confidential. We are members of the information Commissioner's Office ICO.

Payment record					
Date	Payment made and details of dates covered	Type of payment	Discounts given	Receipt number	Payment processed and sent to office