Coppice Primary School
Coppice Clubhouse – Extended Day Provision

ADMISSION FORM

Childs full name	
Name to be used at the club	
Date of birth	
Gender	
Ethnicity	
Religion (if any)	
Languages spoken	
Names of Parents/Carers	1 Daytime Tel No: Mobile No: 2 Daytime Tel No: Mobile No:
Home address	
Home Telephone Number	
Parents/Carers place of work	1 2
Other emergency contact details	Name Tel No:
Name of persons authorised to collect your child (including contact numbers)	1 Tel No: 2 Tel No: 3 Tel No:
Doctor's name	
Doctor's address/Telephone Number	
Details of any significant health issues (including a special educational needs/and/or physical disabilities statement)	
Details of any special dietary requirements, allergies and significant food and drink preferences	
Any other relevant information	

I hereby consent for my child _____ to take up a place at Coppice Primary School's extended day care provision, Coppice Clubhouse, and will abide by the terms and conditions set out in its policies and procedures.

I_____ have understood the expectations and obligations relating to both myself and the club, and agree to abide by them.

I understand that persistent late or non-payment of fees will jeopardise my child's place at the clubs. I agree to pay in full for each session prior to my child attending the clubs.

I can confirm that the information given above is correct, and I promise to contact the club or the school office as soon as any of the details change.

Signature of Parent/Carer _____

Date _____

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