

# St Joseph's Little Rascals Ltd.



St Joseph's Catholic Primary School  
Cedar Road  
Chorley  
Lancashire  
PR6 OJF

Tel: 07570828211  
Tel: 01257 265998 (SCHOOL)

**Little Rascals Ltd.**  
**Enrolment Form**

|  |                          |                              |
|--|--------------------------|------------------------------|
| <b>Child's Surname:</b>  | <b>Child's Forename:</b> |                              |
| <b>Legal Surname:</b>  | <b>DOB:</b>              | <b>Gender: Male / Female</b> |
| <b>Home Address:</b>   | <b>Telephone No:</b>     |                              |
| <b>Postcode:</b>   |                          |                              |
| <b>Name of parent/Carer your child normally lives with:</b>                    |                          |                              |
| <b>Relationship to Child:</b>  |                          |                              |
| <b>Name of person/s who will usually collect your child from B&amp;A Club:</b> |                          |                              |
| <b>Relationship to Child:</b>  |                          |                              |

|                  |                                 |
|------------------|---------------------------------|
| <b>Religion:</b> | <b>Language spoken at home:</b> |
|                  |                                 |

(Please ensure you include the address of both parents on the admission form)

|                                |                                |
|--------------------------------|--------------------------------|
| <b>Emergency Contact No: 1</b> | <b>Emergency Contact No: 2</b> |
| <b>Name:</b>                   | <b>Name:</b>                   |
| <b>Address:</b>                | <b>Address:</b>                |
| <b>Telephone No:</b>           | <b>Telephone No:</b>           |
| <b>Mobile No:</b>              | <b>Mobile No:</b>              |
| <b>Works No:</b>               | <b>Works No:</b>               |

|                                |                                |
|--------------------------------|--------------------------------|
| <b>Emergency Contact No: 3</b> | <b>Emergency Contact No: 4</b> |
| <b>Name:</b>                   | <b>Name:</b>                   |
| <b>Address:</b>                | <b>Address:</b>                |
| <b>Telephone No:</b>           | <b>Telephone No:</b>           |
| <b>Mobile No:</b>              | <b>Mobile No:</b>              |
| <b>Works No:</b>               | <b>Works No:</b>               |

|                          | Fees  | Monday | Tuesday | Wednesday | Thursday | Friday |
|--------------------------|-------|--------|---------|-----------|----------|--------|
| 7.30 - 9.00              | £3.75 |        |         |           |          |        |
| 3.10 - 5.45              | £5.50 |        |         |           |          |        |
| <b>Parent signature:</b> |       |        |         |           |          |        |
| <b>Date:</b>             |       |        |         |           |          |        |

Please tick the boxes to indicate which sessions you require.

|                               |   |
|-------------------------------|---|
| <b>Name of Family Doctor:</b> | <u><b>Prior Parental Consent for Emergency Treatment</b></u><br><br><b>I give parental permission to seek any necessary emergency medical advice or treatment for my child whilst he/she is attending B and A Club.</b><br><br><b>Parent/Carer Signature:</b> |
| <b>Address:</b>               |   |
| <b>Telephone No:</b>          |   |

| <b>Does your child have any medical conditions or needs?</b> | <b>Does your child have any Special Dietary Requirements including preferences or food allergies?</b> | <b>Does your child have any Special Educational Needs?</b> |
|--|---|--|
| <b>YES / NO</b>  | <b>YES / NO</b>   | <b>YES / NO</b>  |
| <b>If YES please give details:</b>                           | <b>If YES please give details:</b>  | <b>If YES please give details:</b>                         |
| <br><br><br><br><br><br><br><br><br><br>                     | <br><br><br><br><br><br><br><br><br><br>  | <br><br><br><br><br><br><br><br><br><br>                   |

**Any other information:**

  
  
  
  
  
  
  
  
  
  

|   |              |
|---|--------------|
| <u><b>Internet Permission</b></u><br><br><b>As the parent or legal guardian, I grant permission for my child to use the internet.</b>   |              |
| <b>Parent Signature:</b>  | <b>Date:</b> |
| <u><b>Photograph Permission</b></u><br><br><b>As the parent or legal guardian, I grant permission for my child's photograph to be taken and used in the setting for display purposes.</b> |              |
| <b>Parent Signature:</b>  | <b>Date:</b> |

# CHILD PROFILE

tell us a little bit about yourself

My name is.....

I am.....years old

I live with.....

I like doing.....

I really don't like.....

Out of school I attend  
these clubs.....

My favourite toys, games  
and activities are.....

I like to eat and drink ...

My favourite place is.....

I am particularly good  
at.....

## CHILD ALLERGY MANAGEMENT PLAN

**NAME**

**D.O.B**

**ALLERGY:**

**ALLERGY**

List products that cause the allergy.

**REACTION**

How are they affected? Rash, sickness, diarrhoea, swelling etc.

**TREATMENT**

Current regular medication being taken. Prescribed or non prescribed

**RECOMMENDATIONS**

Emergency/immediate treatment in the event of an allergic reaction whilst at nursery.

**ALTERNATIVE SUGGESTIONS**

Meal suggestions etc to replace what we make.

**SIGNATURE  
(PARENT/CARER)**

**DATE**



## Little Rascals Ltd.

### FEES

Fees are payable weekly, monthly, half termly or termly in advance, by cheque or cash, standing orders can be arranged if preferred.

In the case of fees not being paid in excess of 3 weeks the club reserves the right to cancel the place with immediate effect.

Reduction of fees is applicable in the following circumstances; siblings will be given a 50 pence reduction per session.

Although booking in advance, should your circumstances change you will not be charged for those sessions and any monies owed will be carried forward to the next session.

### SESSION TIMES AND FEES

Fees are currently as follows;

Before School 7.30 – 9.00 am - £3.75

After School 3.10 – 5.45 pm - £5.50

Fees may increase annually. Parents will be notified one month in advance of any increases.