

National Resource Centre for Supplementary Education

Name of school:


Registration form

Data Protection Act

This information is being collected so that we put your daughter/son in the right class for her/his age group and so that we can track her/his attendance and progress.

It also helps us to keep your daughter/son safe – so that we can contact you if they are ill or hurt, for example.

We will not contact your daughter/son's mainstream school without your permission in writing.

We give the information above the solid line  (see below) to our funders so that they can check our work. We do not give information to any other organisation.

Daughter's/son's name:Home Post Code.....

Weekday (mainstream) school attended:

Year group: Date of birth:

Girl/boy: Ethnic origin:



Parent's/carer's name:

Address:

.....

Postcode: Tel:

Emergency names and telephone numbers

Primary contact:

Tel:

Secondary contact:

Tel:

Any other information we should know

(such as your child's medical condition or dietary requirements)

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.....
.....

Signed relationship to child..... Dated

Can also include:

Parental consent for photographs

Parental consent for specific activities eg. sports, whether or not a child is to be allowed to leave alone, etc.

Parent/School agreement

Code of behaviour