

Forest Edge Learning Federation

Executive Headteacher: Mrs Tracy Allen

Wraparound Care - After School Club:

* I consent for my child to attend the After School Club. I understand the club has policies and procedures and there are expectations and obligations relating to both the club, myself and my child and I agree to abide by them.
* I understand that the federation’s policies will apply to the ASC, including Child Protection and Data Protection.
* I give permission for a trained member of staff to administer appropriate first aid if required.
* I understand that I may still be charged if I fail to notify the school that I do not need the place.
* I have read and accepted the terms and conditions for my child attending the After School Club – including information regarding late pick-ups.

Signature of Parent/Carer/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of child/children\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_