



Broomhill Breakfast / Teatime Club Registration and Medical Form

Child's full name		
Name to be known by		
Child's Base		
Address		
Parent contact email		
Parent / Guardian name(s)		1) 2)
Contact 1		
Address if different from child's		
Contact telephone numbers		Home Mobile Work
Contact 2		
Address if different from child's		
Contact telephone numbers		Home Mobile Work
Additional person(s) authorised to collect child Name and contact no.		
*Password to be used *		

Medical Information

Details of Child's doctor		
Name, address and telephone number		
Does your child have any medical problems or disabilities? If yes please state		
Details of any medication your child will need to have available, e.g. inhalers		
Does your child have any known allergies? If yes please state		
Any other relevant information you wish to provide		
Parental Consent		
I consent to any emergency medical treatment necessary during attendance at Breakfast and Teatime Clubs	Yes	No
I authorise club staff to sign any written consent forms required by the hospital authorities if any delay in getting consent is considered by the doctor to endanger my child's life		
I give consent for my child to be taken out of school grounds for visits and outings with club staff if given prior notice		

Booking information - Permanent Sessions						
	Charges Per session	Mon 3-6pm	Tue 3-6pm	Wed 3-6pm	Thu 3-6pm	*Fri 3-5pm
Breakfast 7.50 - 8.20am	£7					
Teatime 3.00 - 6.00pm	£13.50					*
Fri - 3-5pm*	£9.50					

Any queries please contact the office on 0114 2660936 or email
 Manpreet Venables: mvenables@broomhill.sheffield.sch.uk