



## Crèche Enrolment Form

### CHILD

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Child's Date of Birth:    /    /    Immunized    Yes/No

### PARENTS

First Name: \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_ P/Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

**EMERGENCY CONTACT** Please provide the name of another adult contact in the case of an emergency and/or collection of your child: (other than parents listed above)

First Name \_\_\_\_\_ Surname: \_\_\_\_\_

Address: \_\_\_\_\_ P/Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Mobile: \_\_\_\_\_

### DETAILS OF THE CHILD:

Please provide the below details of your child:

Breastfed / Bottle: \_\_\_\_\_

Toilet training / Nappies: \_\_\_\_\_

Other: \_\_\_\_\_

**ALLERGIES: Does your child have any ALLERGIES?      Yes / No**

If yes please provide details: \_\_\_\_\_

\_\_\_\_\_

Action plan/report: PARENT  STAFF

**ACCEPTANCE OF CONDITIONS OF USE (please tick below boxes)**

I accept that I must stay at 24/7 Power Fitness while my child is in crèche.

I understand that I must immediately return to the crèche to attend to my child should I be requested to do so by crèche staff and take responsibility.

I consent to medical treatment being obtained for my child in an emergency.

I understand that I must book my child's place & sign the attendance book on arrival and on leaving and that I need to phone and cancel the booking if my child does not attend.

If my child needs to go to the toilet or needs a nappy change, 24/7 Power Fitness staff will inform me immediately, and ask me to come out of class to tend to my child.

When leaving the crèche I take full responsibility in keeping my child away from the gym equipment

**Signature:** \_\_\_\_\_

**Date:**        /        /