

All About Me

(to be filled in by your child, with help where necessary)

Name: _____

Date of Birth: _____

Club: _____

I have a friend who attends Kids Collective	YES/ NO	Name:		
My favourite food is				
Foods I dislike are				
I am allergic to				
My favourite game is				
My favourite TV programme is				
My favourite story character is				
I have pets	YES /NO	Name:		
		Name:		
My school is		My teacher's name is:		
I am in Year				
I like to play with				
I am frightened of				
I have brother(s) and / or sister(s)	YES/ NO	Name:		D.O.B.
		Name:		D.O.B.
My favourite sport is				
My favourite team is				
I should do homework at Kids Collective	YES /NO	If yes, how much? Please give detailed instructions.		
Please tell us more about you:				
Child's Signature			Parent's Signature	

All About My Family

My Parent's names are:

(1).....

I call them

.....

(2).....

I call them

.....

Other special people in my life:

.....

.....

.....

My Home (where parents live in different homes please state both)

I live in a

.....

Who lives with me in our house:

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I live in a

.....

Who lives with me in our house:

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When I'm at home the things I enjoy the most are

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When I'm not at Kids Collective, my typical day/weekend looks like:

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Any other information that will support your time at Kids Collective:

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KIDS COLLECTIVE PARENT CONSENT FORM

Please provide the Club Leader / Deputy with a visual of your child's **FULL** birth certificate. The number on the top right corner of birth certificate needs to be recorded below to confirm parent/carer's parental responsibility.

Child's full name: _____

Number on the top right corner of birth certificate _____

(The full certificate seen by)(Club Leaders signature)(Date)

The following adults are recorded on the child's birth certificate and have legal parental responsibility for the above named child:

Adult name: _____ **Relationship:** _____

Adult name: _____ **Relationship:** _____

(Please print names clearly)

Please provide names of adults who have legal contact with the above named child:

Adult name: _____ **Relationship:** _____

Adult name: _____ **Relationship:** _____

(Please print names clearly)

I give consent to my child being transported to hospital in an emergency. It is Kids Collective policy to always try to contact the child's parent / carer at the time. YES / NO

I give consent to my child receiving any necessary emergency medical advice or treatment. YES / NO

I give consent for the First Aiders within Kids Collective to use plasters and alcohol-free antiseptic wipes on my child if necessary. YES / NO

I give consent to my child being given Calpol if necessary according to labelled dosage. I understand that every attempt will be made to contact me before doing so but if uncontactable a First Aider will administer as necessary. YES / NO

I give consent to my child being given Piriton if necessary according to labelled dosage. I understand that every attempt will be made to contact me before doing so but if uncontactable a First Aider will administer as necessary. YES / NO

I give consent for Nivea SPF50 sunscreen provided by Kids Collective to be applied to my child by staff when necessary. If you circled 'NO' please state the name of sun cream you are going to provide:

I give consent to my child being seen by other professionals to support my child's well-being and development. We will always notify you of this taking place. YES / NO

I give consent for photographs/videos/audio recordings which include my child to be used for:

- Child Development Records (Nursery children only) Records are passed on to parents when a child finishes nursery. YES / NO
- Club displays - photos are stored securely and anonymously on the Kids Collective Head Office server indefinitely. YES / NO
- Club publications, including; newsletter (which is published on our website), magazine/newspaper articles both printed and online (e.g. Raring2go and Netmums), Kids Collective literature (e.g. Parent handbook), Kids Collective website, Elmscot Group & Kids Collective Facebook, Twitter and Instagram pages and further social media sites as appropriate. Photos are stored securely and anonymously on Head Office computers indefinitely. YES / NO

I give consent to my child's work being displayed in local establishments i.e. the library. YES / NO

I give consent to my child's work being labelled with their first name. YES / NO

I give consent for my child to have their face painted if they wish when these activities are arranged. YES / NO

I understand that the daily activity plans are on display, including extra activities (Inc. bouncy castle & sport activities) and I must inform the team if I do not want my child to take part. YES / NO

Comments/Additional Information:

Signed (parent / carer with legal parental responsibility for the above named child):

Date: _____

COLLECTION CONSENT FORM

Please enclose photos of all adults who you authorise to collect your child.

Name of Child:			
<p>I give consent for my child to be collected from Nursery/Kids Collective by the following adults, including myself. The people named below understand that they must be aware of the password I have given to Nursery/Kids Collective and have been preferably introduced to Nursery/Kids Collective staff in advance.</p> <p>I understand I must complete a new Collection Consent Form if any of the arrangements below change.</p>			
Name of adult collecting child:	(your name)	Relationship to child:	(your relationship)
Physical description	(your description)		
Name of adult collecting child:		Relationship to child:	
Physical description			
<p><i>Please delete as applicable:</i></p> <p>1. This person is able to collect my child at any time without prior notification from myself OR</p> <p>2. I will always inform staff on the day if this person is collecting my child</p>			
Name of adult collecting child:		Relationship to child:	
Physical description			
<p><i>Please delete as applicable:</i></p> <p>1. This person is able to collect my child at any time without prior notification from myself OR</p> <p>2. I will always inform staff on the day if this person is collecting my child</p>			
Name of adult collecting child:		Relationship to child:	
Physical description			
<p><i>Please delete as applicable:</i></p> <p>1. This person is able to collect my child at any time without prior notification from myself OR</p> <p>2. I will always inform staff on the day if this person is collecting my child</p>			
CONFIDENTIAL PASSWORD:			
SIGNATURE OF PARENT/CARER: (must have legal parental responsibility)			
DATE:			

PLEASE NOTE THAT IF YOU GIVE PERMISSION FOR SOMEONE TO COLLECT YOUR CHILD AT ANY TIME WITHOUT PRIOR NOTIFICATION, WE WILL ALWAYS ALLOW YOUR CHILD TO LEAVE WITH THIS PERSON IF THEY HAVE THE PASSWORD. UNLESS CONSENT IS GIVEN ON THIS FORM, OR YOU HAVE OTHERWISE CONTACTED US TO GIVE CONSENT, WE WILL NOT RELEASE A CHILD FROM OUR CARE WITHOUT FIRST GAINING THIS CONSENT

HEALTH CARE & ALLERGY INFORMATION FORM

Child's full name: _____

Child's DOB: _____

Setting: _____

Parents should please complete this form with their child's Key Person / member of the Kids Collective team as necessary, then sign and date at the bottom of the page.

1. Does your child have a Medical diagnosis or condition? (Please give details)

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2. Describe medical needs and details of symptoms?

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3. Any additional daily requirements:

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4. Does your child have an allergy, if so of what kind?

Food Contact Insect bites/stings Other.....

5. What are the allergens/cause of the allergy? Please list all known allergens/products that cause the reaction.

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.....
.....

6. What is your child's usual reaction?

.....
.....

7. What non-medicinal treatment would you like us to give?

.....
.....

8. Medicine

Please note that a separate Medicine Consent Form will need to be completed as usual. This Allergy Information sheet does not replace the Medicine Consent Form.

- Is any medication required? YES / NO
- Is the medication to be kept on the premises? YES / NO
- What is the medication?
- What is the dosage? Amount:How often:
- Under what circumstances should it be given?

- Is specialist training in medicine administration required? YES / NO

- Members of the team who have completed specialist training?

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9. Is a specific Dietary Plan required in order to avoid any allergens? YES / NO

10. Is a separate Risk Assessment required? YES / NO

11. Have you read and signed the Parent's Consent Form especially the sections regarding menus / activities? YES / NO

Allergy Matrix

Please complete the allergy matrix below by circling the Action Level based on the likelihood of occurrence and possible reaction of your child if exposed to the allergen. The team use this action matrix to put together a plan for the care of your child.

		Likelihood		
		Unlikely <small>(Not expected to cause a reaction but it is conceivable in current circumstances. Could occur sometime)</small>	Possible <small>(Concern that a reaction might occur in current circumstances)</small>	Likely <small>(Concern that a reaction will probably occur in the near future)</small>
Consequence/Reaction	Major <small>(Life threatening reaction)</small>	Action Level 3	Action Level 6	Action Level 9
	Moderate <small>(Short term threatening reaction, e.g. respiratory restriction)</small>	Action Level 2	Action Level 4	Action Level 6
	Minor <small>(Short term non-threatening reaction, e.g. rash)</small>	Action Level 1	Action Level 2	Action Level 3

Comments:

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Emergency Contact Information (Primary contact must be an adult with parental responsibility)

Primary contact Name.....
 Telephone (work).....
 Home.....
 Mobile.....

Second contact Name.....
 Telephone (Work).....
 Mobile.....

Clinic/ Hospital contact

Name
 Telephone.....

G.P

Name.....
 Telephone.....

I certify that I am an adult with full Parental Responsibility for the child named on this form and that the above information is correct.

Parental Signature: Date:

Key Persons Signature: Date:

Review Date:

To be completed by the Setting Health and Safety Co-ordinator.

Has a Risk Assessment been put in place for this child YES / NO

Has a medical letter been returned and attached to this form to confirm the Allergy? YES / NO

Managers signature: Date:

Health and Safety Co-ordinators signature: Date:

PARENT'S CODE OF CONDUCT

Kids Collective is a welcoming, supportive and inclusive organisation and it is important that all members of the Kids Collective community work together. We are proud of our good reputation and aim to create an environment in which children and staff are safe from hurt and abuse, and in which any suspicion of such is promptly and appropriately responded to.

We are very fortunate to have supportive and friendly parents and carers. Our parents and carers recognise that educating and caring for children is a process that involves partnership between home and club, and understand the importance of a good working relationship to equip children with the necessary skills for life.

The purpose of this code, which forms part of the Parents as Partners Policy, is to provide a reminder to all parents, carers and visitors about expected conduct to ensure a safe and positive environment for our children.

We expect parents, carers and visitors to show respect and consideration for others by:-

- Arriving and leaving within the hours of opening
- Supporting the respectful ethos of the nurseries/clubs by setting a good example in their own speech and behaviour towards all members of the Kids Collective community both on Kids Collective's school premises and in its immediate area.
- Working together with all staff for the benefit of the children. We ask that if you have any areas of concern you ask to speak to member of the team or manager in private. The team and/or management will discuss and clarify specific events, issues and queries in order to bring about a positive solution.
- Correcting their own children's behaviour, especially in public where it could otherwise lead to conflict, aggressive or unsafe behaviour.
- Respecting the Club environment and premises including driving and parking carefully for the safety of the children, yourself and all road users.
- Not bringing animals on-site for health and safety reasons unless you have sought express permission from the management.
- Not bringing large objects such as bicycles or prams/buggies/car seats into the club buildings.

Kids Collective staff have the right to work in a mutually respectful environment. Kids Collective will not tolerate any inappropriate or aggressive behaviour towards any staff member or volunteer by any parent, carer or visitor. We will take any appropriate action we deem necessary to deal with any such situation. Such behaviour includes:-

- Using loud and/or offensive language or displaying temper
- Threatening, aggressive or intimidating conversations or behaviour towards another adult or child
- Abusive, threatening or damaging emails, phone or social media messages relating to the organisation
- Using tobacco or being under the influence of alcohol or drugs on club premises.
- Damaging or destroying club property or premises.

Staff have the right to request any person, whose behaviour is deemed threatening towards any member of the Kids Collective, to leave the premises. They may do this on their own although ideally they will have another staff member as witness and it is expected that in most circumstances actions will have been taken to pacify the situation prior to this action. If unacceptable behaviour is continued and the individual(s) concerned does not leave the premises, staff have the right to call the police for assistance. Records will be made on Incident sheets.

Parents' Code of Conduct

We agree to abide by the Parent's Code of Conduct referred to in the Parents and Partners Policy and detailed above:

Child's Name

Parent 1 Print Name

Date

Parent 1 Signature

Parent 2 Print Name

Date

Parent 2 Signature

Whilst we would appreciate you taking the time to sign and return this parents' code of conduct, it is our intention that the new policy will be applicable and enforceable for all our parents and guardians and therefore in the event of a parent or guardian not signing a copy, this will not excuse any inappropriate behaviour towards our colleagues.

Thank you for your understanding.



LETTER OF GUARANTEE

Kids Collective Ltd
27 Warwick Road
Hale
Cheshire WA15 9NP
Tel: 0161 980 0003

Email: iwanttobe@kids-collective.co.uk
www.kids-collective.co.uk

This letter should be signed by all persons paying
Kids Collective fees and returned by the first day of attendance

To whomever it may concern,

I/we (delete as appropriate) the undersigned, guarantee payment to Kids Collective Ltd of any outstanding amounts due in the respect of:

..... (name of child)

Such amounts will be due and payable in accordance with the Terms and Conditions (a copy of which has been issued and can be found in the Parents' Handbook and on the reverse of the Application Form) but in any event on demand by the said Kids Collective.

Guarantor 1:

Guarantor 2:

Signed.....

Signed.....

Name (PRINT).....

Name (PRINT).....

Date.....

Date.....

Payment of Fees Terms and Conditions

All fees must be paid by Direct Debit unless by prior arrangement. Invoices will be issued monthly in advance and may include any additional payment for extra sessions which will be due immediately. In the event of fees or other sums payable to Kids Collective Ltd being outstanding for more than 14 days from the date of invoice without a previous arrangement being made, you will receive written notice to withdraw your child from the Club. Such action will be at the discretion of the Directors.

