

OFFICE USE ONLY			
FORM			
NUMBER			

# St. John's Summer School 2018

PLEASE COMPLETE ALL THE FORMS. FULL PAYMENT WILL BE REQUIRED ALONG WITH COMPLETE FORMS TO SECURE A PLACE. PAYMENT IS NON REFUNDABLE.

### **NOTES TO ALL PARENTS/ LEGAL GUARDIANS**

- \* This project is for children aged 8yrs +; we do not set an upper limit as you are the best judge as to whether your child would take part or not they might find them too "babyish" (as a guide our upper age tends to be 14yrs).
- \* St John's Centres insurance does not cover children under the age of 8 years. Please bring proof of Date of Birth e.g. Passport, Birth Certificate, Medical Card, Child Benefit or a letter from your school.





\* The cost per day is £5 per child (lunch included). If you have a fussy eater you can send in a packed lunch. (There will be no discount if you do this - sorry.)



- \* Please make sure your child brings a water bottle with them (with name on) so they have access to a drink at all times.
- \*Any child leaving the building (St John's Centre) without consent from a parent/legal guardian or not under supervision of staff, will no longer be under the responsibility of the project. We'll try to ensure your child returns, but we do have to consider the welfare of others. We will inform parents/guardians of a child's departure as soon as we can.
- \* Please leave valuables at home your child is responsible for their own stuff. If your child needs a mobile for home time we can keep it locked in the office for them during the day.
- \* Bad behaviour will not be tolerated. We aim to make this an enjoyable experience for both workers and children. If we can't resolve an issue within the project we will inform the parent/legal guardian and take the appropriate action.



- \* Ensure your child wears suitable clothing (something you don't mind getting dirty). We play sports and games so your child must be able to run around safely in their footwear. Clothing must be suitable to take part in "sporty" activities.
- \* Let us know if your child won't be coming in. Sick children need to be off for 48hrs (sickness; temperature; diarrhoea; conjunctivitis). Sorry, will not be able to refund payment, money is used to pay for food, trips etc. If you don't tell us and are absent for 1 full day without contacting staff your space will automatically be given to a child on the waiting list, no refund. Plus you might not get your place back that week.



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## Summer School 2018 PARENTAL CONSENT FORM

To be completed by the parent or legal guardian. If you have more than one child (maximum 3) attending please check you are given a separate MEDICAL CONSENT FORM for each child.

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AMOUNT			
PAID			
DATE			
STAFF SIG.			

This year we are on a limited budget. We can only offer 3 days a week. 36 places each day. Summer School 2018 – 3 days a week (Tue, Wed, Thur) for 2 weeks £5 per day – WK 1 = 31<sup>st</sup> July, 1<sup>st</sup> August and 2<sup>nd</sup> August, WK 2 = 7<sup>th</sup>, 8<sup>th</sup> and 9<sup>th</sup> August; Tuesday, Wednesday & Thursday 10am until 3pm. We include the chance for children to go on trips, (we may use public transport). Our aim is to encourage teamwork, develop self confidence and enjoy time together. You can book your child/ren onto as many weeks/days as you want. Child/Children's name

1	NAME	Age	. M / F
2	NAME	Age	. M / F
3	NAME	Age	. M / F

### Please tick days required:-

WEEK 1 31 <sup>st</sup> July – 2 <sup>nd</sup> August	Child 1 ✓	Child 2 ✓	Child 3 ✓
Tue			
Wed			
Thur			

WEEK 2 7 <sup>th</sup> – 9th August	Child 1 ✓	Child 2 ✓	Child 3 ✓
Tue			
Wed			
Thur			

We will be taking photographs/video of the Summer School that will be used for funders' reports, publicity (including websites) and future projects. Do you give consent for your child/ren to be included?

YES NO (please circle the one that applies)

We use computers to play games, download pictures, surf the internet and produce displays. This will be done under supervision. Do you give consent for your child/ren to take part?

YES NO (please circle the one that applies)

Are the children above allowed to walk home on their own? YES NO



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# Summer School 2018 MEDICAL CONSENT FORM AND INFORMATION ONE FOR EACH CHILD PLEASE

Name of childChild's date of birth
Medical Information
Does your child/children suffer from any medical, physical, emotional or behaviour conditions which might affect his/her safety or the safety of others during the project. YES / NO
If yes, please give details
Is your child/children currently undergoing any form of medical or psychological treatment, including any medication YES / NO
If yes, please give details
Does your child have any allergies to food, paints etc (include touching foods) YES / NO
If yes please give details
Does your child have any dietary requirements (include food they won't eat)  YES / NO
If yes please give details
Does your child have an up to date tetanus inoculation? YES / NO
If your child has been in contact with any infectious or contagious diseases or suffered from anything in the week before the summer school that might be, or become, infectious or contagious you must let staff know details. Consider others - remember children can pass on infections to others in the family who may be vulnerable – e.g. elderly or pregnant.
Your child might be involved in water based activities in Salford Quays or on the River Mersey.
Can your child swim 25m (one length of the pool) YES / NO
Is your child confident in the water YES / NO
For future funding it's useful to know what is your child's ethnicity?



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## **Summer School 2018 EMERGENCY CONTACT INFORMATION**

A contact person must be available **at all times**, please ensure you give us the correct details as this can cause difficulties during the project.

1st contact in an emergency:- NameRelationship to child/ren
Primary phone numberOther number
2 <sup>nd</sup> contact in an emergency:- NameRelationship to child/ren
Primary phone numberOther number
Home address of child
Your email address
this box
In the unlikely event of an accident or illness needing immediate treatment, I agree to my child receiving First Aid from our appointed First Aid person and be referred to a Doctor/Nurse if necessary.
I undertake to inform Diane Browne (admin.) of any changes in medical circumstances from the date of signature until the end of the project. She will then inform the staff team if needed.
My child/children's doctor is
Name of surgery & phone no
We try to make sure children have a positive experience at Summer School. The following info helps us plan if children want to be in the same groups (but we can't guarantee it.)
School attending
Does s/he know other children coming to Summer School? Please give their name/s and relationship – e.g cousin / friend / classmate / neighbour (include travelling together)
I understand if my child leaves the premises without consent I will be contacted. (Staff will try to ensure that your child returns to the Centre but do have to consider the welfare of others.)
Signature of Parent or Legal Guardian I have read all the documents attached and agree.
Signature Date

Print your name.....



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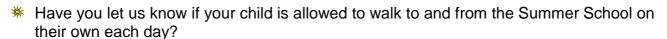
# St. John's Summer School 2018 BOOKING CONFIRMATION (OFFICE STAFF TO COMPLETE)

WEEK 1	CHILD	CHILD	CHILD
	1	2	3
Tue 31st Jul			
Wed 1 <sup>st</sup> Aug			
Thurs 2 <sup>nd</sup> Aug			

WEEK 2	CHILD	CHILD	CHILD
	1	2	3
Tue 7 <sup>th</sup> Aug			
Wed 8 <sup>th</sup> Aug			
Thurs 9th Aug			

#### REMEMBER

- Day starts 10am and ends 3pm on trip days these times might change slightly.
- Make sure your child brings a bottle for water each day and it has their name on it.
- \* Lunch is provided. If they want to bring their own food or extra snacks that is up to you.
- Wear suitable clothing your child must be able to run around safely in their footwear. Clothes suitable for "sporty" and "arty" activities.



- \* We will not be responsible for the loss of valuables leave them at home. We can lock phones in the office during the day for safety and give them back at home time, just ask.
- Phone if your child can't make it on any of your days.
- \* If you are absent for 1 full day without contacting us, your space will be given to a child on the waiting list. You will lose your place for that week and your payment.
- There will be no refund of payments.

# **OUR NUMBER IS 0161 872 7795**

(Please leave a message if no one answers the phone, we might be busy but will get back to you.)



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## **Summer School Privacy Notice**

#### **Using your Information**

When you complete our Summer School forms, we will use the information you have given us to contact you, or the child's other emergency contact, if it is necessary for the child's welfare.

We will also contact you with details of next year's Summer School.

#### **Storing your Information**

We will store your information securely, and delete it from our system 12 months after the end of the Summer School.

#### **Sharing your Information**

We will share your child's information with medical staff if it is necessary for your child's treatment.

We have a legal obligation to raise any safeguarding concerns, which may involve sharing your child's information with other agencies.

We give information to our funders about who benefits from our Summer School, but this does not include names or any other identifying details. Photographs of your child will only be used if you have given separate consent.

#### You have the right to:

- See what information we hold about you and your child;
- Correct the information if it is wrong;
- Stop us from keeping, using or sharing the information (unless legally required); and
- Change how we contact you.

If you would like to see the information we hold about you or your child, or change how we contact you, please contact Emma Wilton, our Data Protection Lead.

You can view our **Data Protection Policy**, which covers storage, use and sharing of your information, on our website www.stjohnscentre.org, or ask a member of staff for a copy.

For more information about your rights under the EU General Data Protection Regulations, please visit the Information Commissioner's Office website www.ico.org.uk/.

Signature	Date
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