



St Bede's Wraparound Care



Registration Form

Child's name (in full)	<input type="text"/>		
Name to be called	<input type="text"/>	Date of birth	<input type="text"/>
Class	<input type="text"/>		
Home address	<input type="text"/>		
	<input type="text"/>	Postcode	<input type="text"/>
Home telephone number	<input type="text"/>		

Parent(s) or Carer(s) details

Mother / Carer's full name	<input type="text"/>	Father / Carer's full name	<input type="text"/>
Mother / Carer's address (if different from above)	<input type="text"/>	Father / Carer's address (if different from above)	<input type="text"/>
	<input type="text"/>		<input type="text"/>
Telephone number (evening)	<input type="text"/>	Telephone number (evening)	<input type="text"/>
Employer's name and address	<input type="text"/>	Employer's name and address	<input type="text"/>
	<input type="text"/>		<input type="text"/>
Employer's telephone number	<input type="text"/>	Employer's telephone number	<input type="text"/>
Telephone number	<input type="text"/>	Telephone number	<input type="text"/>
	<input type="text"/>		<input type="text"/>

Names and addresses of person(s) collecting the child from the after school club (if different from above)

Children will only be allowed to leave with a named person	
1. Name	2. Name
<input type="text"/>	<input type="text"/>
Address	Address
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
Phone number (day)	Phone number (day)
Phone number (evening)	Phone number (evening)
<input type="text"/>	<input type="text"/>