

Start Date.....

Pebbles After School Club

Information Sheet

Child's Full Name:

Names known as:

Child's Class:

Parents Name:

Password:

(To be given to any person picking up your child/ren with your consent)

Name of any persons **NOT ALLOWED** to collect the child

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Sims Data sheet checked by parent
(please tick to confirm data sheet details are correct)

Photo Permission form completed

Allergy/Asthma Register Checked

Signature of Parent:

Dated

Pebbles After School Club

Teacher's Comment Form

..... is due to start Pebbles after school club.

Are there any issues regarding behaviour etc. that the Pebbles staff will need to be aware of?

Teacher's Comments

Signature.....

Is further information required from SENCO? YES/NO

SENCO's Comments

Signature.....