

As you have answered “Yes” to one or more questions in the booking system, we require further information. Please fill in this form and send it back to the club as soon as possible. This helps us to provide the best care for your child and keep them safe. Thank you.



1. Medical Information

Does your child have any medical conditions? Yes No

If yes, please provide details:

Does your child have any allergies? Yes No

If yes, please specify (food, medication, environmental):

Is your child currently taking any medication? Yes No

If yes, please provide details and dosage instructions:

Doctor's Name: _____

Doctor's Phone Number: _____

2. Additional Needs – if you don't disclose this, we have the right to review your child's place.

Does your child have any additional needs or require extra support? Yes No

If yes, please provide details so we can best support them:

3. A bit about your child

Do they have a social worker? Yes No

If yes, please provide details:

Are any external agencies involved with your child? Yes No

If yes, please provide details:

Is your child registered with a dentist? Yes No

Would you like us to work on developing anything academically?

Feel free to send children with homework, school/nursery targets and reading books and we will work on what we can to help.

4. Declaration

I confirm that the information provided is accurate and complete. I understand that I must inform the Holiday Club of any changes to my child's information.

Parent/Guardian Name (Print): _____

Signature: _____

Date: ____ / ____ / ____