

Acorns to Oaks Personal Details Form

Personal details of the Child

Surname:	
First Name:	
Is the child known by any other names? If so, please state:	

Gender:	
Date of Birth:	
Address:	

Ethnicity:	
Child's First Language:	
Child's Home Language:	
Please state all Languages that your Child speaks:	
Child's Religion:	
Is English an additional language to the Child:	YES / NO

Medical Details of the Child

Doctors Name:	
Doctors Practice Address & Phone Number:	
Does your child have any Special Educational Needs?	
Does your child have any previous serious or ongoing illness or allergies, please give details:	
Are there any foods/drinks that your child cannot eat due to allergies or religion?	
Has your child ever received Occupational or Speech and Language Therapy? Please state details:	

Parent Details and Emergency Contacts: (only persons stated below will be able to collect your child unless advised otherwise)

Title (Miss/Mrs/Mr):		First Name:		Surname:	
Home Address including Postcode:					
Relationship to Child:					
Home Phone Number:					
Mobile Number:					
Work Phone Number:					
Email Address:					
Does this person have Parental Responsibility for the Child?	YES / NO	Does this person live with the Child?	YES / NO	Priority order of contact in case of an emergency	1 / 2 / 3

Title (Miss/Mrs/Mr):		First Name:		Surname:	
Home Address including Postcode:					
Relationship to Child:					
Home Phone Number:					
Mobile Number:					
Work Phone Number:					
Email Address:					
Does this person have Parental Responsibility for the Child?	YES / NO	Does this person live with the Child?	YES / NO	Priority order of contact in case of an emergency	1 / 2 / 3

Title (Miss/Mrs/Mr):		First Name:		Surname:	
Home Address including Postcode:					
Relationship to Child:					
Home Phone Number:					
Mobile Number:					
Work Phone Number:					
Email Address:					
Does this person have Parental Responsibility for the Child?	YES / NO	Does this person live with the Child?	YES / NO	Priority order of contact in case of an emergency	1 / 2 / 3

Further Details

<p>Is there anything else you would like to tell us about?</p>	
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Details of Childcare required

	Monday	Tuesday	Wednesday	Thursday	Friday
Days and times required (please tick):	Breakfast Club: 7:30am-8:50am <input type="checkbox"/>	Breakfast Club: 7:30am-8:50am <input type="checkbox"/>	Breakfast Club: 7:30am-8:50am <input type="checkbox"/>	Breakfast Club: 7:30am-8:50am <input type="checkbox"/>	Breakfast Club: 7:30am- 8:50am <input type="checkbox"/>
	After School Provision 3:15pm- 6:00pm <input type="checkbox"/>	After School Provision 3:15pm- 6:00pm <input type="checkbox"/>	After School Provision 3:15pm- 6:00pm <input type="checkbox"/>	After School Provision 3:15pm- 6:00pm <input type="checkbox"/>	After School Provision 3:15pm- 6:00pm <input type="checkbox"/>

Data Protection Act 1998: The School is registered under the Data Protection Act for holding personal data. The School has a duty to protect this information and to keep it up to date. The School is required to share some of the data with the Local Authority and with the DfE.

Signature:		Date:	
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