



09.01g Registration Update form

Registered as a Charity

Registration No: 1046532

My details remain the same as my original registration form

Signed

Parent 1

Parent 2

Date

My details have changed

Basic details

Name of child

Date of birth

Name of parent(s) with whom the child lives

1

Does this parent have parental responsibility? Yes/No (delete)

2

Does this parent have parental responsibility? Yes/No (delete)

Address

Email

Mobile

Name of parent with whom the child does not live

Does this parent have parental responsibility? Yes/No (delete)

Address

Email

Mobile

Does this parent have legal access to the child? Yes/No (delete)

Emergency contact details (must be over 16 years of age)

Parent 1 - Work/daytime contact number _____

Parent 2 - Work/daytime contact number _____

Any other emergency contact numbers _____

Name _____

Telephone _____

Mobile _____

Name _____

Telephone _____

Mobile _____

Personal details of child

Does your child suffer from any known medical conditions or allergies, or have any special dietary needs or requirements? YES/NO (delete)

Has a risk assessment, if required, been completed? YES/NO (delete)

Has a health care plan and agreement to administer medicine, if required, been Completed? YES/NO (delete)

Signed

Parent 1 _____

Parent 2 _____

Date _____