

Pupil's Name \_\_\_\_\_ Form \_\_\_\_\_

### Details of persons collecting your daughter/son from FIZ Holiday Club

	Full Name	Contact number	PASSWORD (if applicable)
<b>Monday 29 May</b>	<b>BANK HOLIDAY – NO FIZ CLUB</b>	<b>BANK HOLIDAY – NO FIZ CLUB</b>	<b>BANK HOLIDAY – NO FIZ CLUB</b>
Tuesday 30 May			
Wednesday 31 May			
Thursday 1 June			
Friday 2 June <b>Club closes at 5pm</b>			

FIZ Holiday Club closes at 6pm Monday- Thursday and on Friday at 5pm

Penalty charge for Late Collection after these official closing times (no boarding facility available) is £30 until 7pm plus £50 if child stays after 7pm.

### MEDICAL INFORMATION

Please note, FIZ staff will only administer prescribed medicines if parents have given written consent and instructions. Under no circumstances will no –prescribed medication be given.

Does your daughter/son suffer from any known medical conditions? If yes, please give details. If your daughter/son has asthma, please make sure **the inhaler/pump** is brought to FIZ Club.

**INHALER/PUMP YES NO**

**FIZ Club is 'NUT FREE ZONE' therefore please make sure your daughter/son doesn't have any food containing nuts (Nutella, peanut butter, almonds etc.)**

Does your child have any food allergies? If yes, please give details (symptoms of allergic reaction, any medication required and action plan). If your child has an EPIPEN, please make sure the EPIPEN is brought to FIZ Club. Please check the Expiry Date.

**EPIPEN YES NO Action plan should already be in place**

Does your daughter/son has special dietary requirements? If yes, please specify.

What is your daughter/son's favourite food or least favourite food (sandwich filler/fruit/vegetable etc.)?

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Do you give your permission for us to take photographs of your daughter/son to be used in our school marketing material (incl. FIZ noticeboard, Focus on Farringtons, school website)?

Would you like to have a copy of any photos (if any) taken of your daughter/son? (to be sent via email)