

Ally's After School Club

Fee Authorisation and Payment Agreement

2024/2025

P4-P7

Child's name	
Mother's name	
Address	Post Code
Telephone number	
Email	
Father's name	
Address	Post Code
Telephone number	
Email	

Child lives with: (please tick)	Mother	Father	Both Mother and Father	Other
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Starting Date

Agreed Start Date for Child	
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Payment Information

3pm-4pm session	£6.50 per day
3pm-5.30pm session	£15.00 per day
2pm-3pm session (Friday only)	£6.50 per day
2pm-4pm session (Friday only)	£13.00 per day
Payment in advance	
Payment Day	Friday
Your weekly charge is:	
I am paying weekly	
I am paying monthly	

Monthly will be worked out pending on weeks in each month

Please fill in the days and times your child will be attending each week. These will be automatically booked.

Day	From	To
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Important

Parent/Guardian Declaration

- I understand that payment will start at the agreed start date
- I understand that fees are charged on the basis of booking not attendance (If your child does not attend or they are off sick you will still be charged)
- I understand that the club's fees are to be paid weekly/monthly in advance, due no later than the date stated on the booking form.
- I understand that late collection of my child will incur a charge. £2.50 for the first 15 minutes and after this you will be charged for another hour at the cost of £6.50
- I understand the late payment of fees will incur an additional charge of £1 per day until the full payment has been received
- I understand that 1 month paid notice needs to be given for reduction in days booked or if your child leaves our service.
- I have read the Ally's Payment and Fee Policy and agree to the conditions laid out here and in the clubs Policies and Procedures Booklet.

Parent/Guardian signature _____ Date _____

Manager's signature _____ Date _____

Ally's Afterschool Club
Child's information form.

Child's details

Name: _____ **Age:** _____

Address: _____ **DOB:** _____

_____ **Class:** _____

Doctor's name and address

Any medical conditions:

Parent/Guardian details (only those with parental responsibility/PR)

Name: _____ **Name:** _____

Address: _____ **Address:** _____

Contact numbers:

Contact numbers:

Home: _____ **Home:** _____

Mobile: _____ **Mobile:** _____

Work: _____ **Work:** _____

Additional contacts

1.

2.

Name _____

Name _____

Relationship to child _____

Relationship to child _____

Contact numbers _____

Contact numbers _____

Home _____

Home _____

Mobile _____

Mobile _____

Work _____

Work _____

Ally's Afterschool Club

Collection of child

Name of child _____ Age _____
Address _____ DOB _____
_____ Class _____

Name and contact numbers of those who are allowed to pick up your child ,we may also ask for photographic ID:

1. Name _____
Contact Numbers: _____
2. Name _____
Contact Numbers: _____
3. Name _____
Contact Numbers: _____

If I/we the parent(s) are unable to pick the child up from the afterschool setting, I give permission for the above people to collect my child.

Signed Parent/Guardian _____

Date _____

Billing/Payments

Important

The fees that are charged for the afterschool form the main source of income for the group. They cover expenses such as break costs, craft essentials, new toys, staff wages, maintenance and day to day running costs.

Consistent prompt payment of fees will ensure your child's place. Late payments will incur £1 charge for each day it is late. Continuance of late or underpayment of fees will result in your child's place being lost and the place being offered to the next child on the waiting list.

If for any reason your child is unable to attend afterschool, please inform the afterschool manager. They can be contacted by phone, email and text message between 7.30am and 9am and 2pm until close. The school should not be contacted to inform them of non-attendance at afterschool it is a separate organisation and messages cannot be passed on during the school day. Parents are requested to give one month's paid notice in advance when their child is leaving afterschool.

Fees are payable weekly or monthly as agreed with the afterschool Manager when signing the contract.

Parent Policy Agreement.

We/I the parents of _____ have received a copy of Ally's Afterschool's policies and procedures.

We/I have read, understood them and agree to abide by them.

Name of parent: _____

Signed: _____

Date: _____

Dear Parent/Guardian

If you could tick each box to show that you give permission and let us know if your child has any allergies. Any medication, inhalers, epi pens etc. must be sent with the child each day.

Thank you.

I give permission for Ally's Afterschool to take my child to hospital in an emergency.

I give permission for Ally's Afterschool to keep my child's details.

I give permission for Ally's Afterschool to take photos and display them within the school.

I give permission for my child's photos to be displayed on the school website and social media.

I give permission for Ally's Afterschool to take my child on day trips.

If my child has an accident or has become unwell I give permission for staff to help change my child through encouragement to try and change themselves. If this is not possible I will collect/change the child.

During hot weather, I give permission for staff to put sun cream I have provided on my child.

I give permission for staff to administer first aid to my child if required (head injuries will be a phone call)

Any known allergies please give details.

Name of child _____

Signed parent/guardian _____

Date _____

Ally's Afterschool Club

Permission

We sometimes like to watch Christmas films at Ally's in the lead up to Christmas.

I have noticed that a lot of these films are PG. To show these we require your permission.

Please sign below.

I allow my child/children to watch PG Christmas films.

I do not allow my child/children to watch PG Christmas films.

Signed parent/guardian _____

Date _____

Ally's Afterschool Club
Administration of medication

If you require your child to be given medication while in our care, please fill in the information below and return it to a member of staff.

I agree that (name of child) _____ will receive
(dosage and name of meds) _____ (just **today** or every day
at*) _____ (time meds to be administered)

Name of child _____ will be **given/supervised** whilst he/she takes
their medication by _____ (member of staff)

This arrangement will continue until either end date of course of medication or until
instructed by parents.

Parent signed _____

Date _____

Signed (named member of staff) _____

Record of medicine administration to be sent home

As per the above instruction the medication was administered to the child mentioned.

Time _____ Date _____

Signed _____

A copy of this form will be retained for the afterschool records and the original returned to the parent.



Ally's Afterschool Club

Manager: Mrs Bradley

Tel:

Email: cbradley838@c2kni.net

Privacy notice

Here at Ally's we respect the privacy of the children in our care and the privacy of their parents or carers. We believe in clear and transparent procedures that help us understand what data we store, how it is stored and how we dispose of it.

The personal information we collect in relation to you and your child is:

Parent/carer

- Name and address
- Contact details
- Email
- Payment details

Child

- Name and address
- Medical information
- Special needs information
- Accident and safeguarding records
- Date of birth
- Photographs

This information is used only to support your child's wellbeing, provide appropriate care for them, maintain our service to you and communicate with you effectively. Our legal basis for processing the personal information relating to you and your child is to enable us to fulfil our contract with you to the best of our ability.

We will use the contact details you have provided to contact you via phone, text message, email or post to send you information about your child, what is happening in Ally's and any other information we deem relevant. We will also send invoices and communicate with you regarding payment of fees.

We will only share accurate and up to date personal information about you or your child with another organisation if we:

- Are required to by government bodies or law enforcement agencies
- Have a safeguarding concern about your child
- Or have obtained your prior permission

If we decide to share information without parental consent we will record this in the child's file clearly stating our reasons.

All information that you provide is stored securely. Any data that is no longer required will be erased when your child leaves Ally's. Some data may be retained i.e. records of attendance, accidents, complaints, and concerns as required by statutory legislation and industry best practice for the prescribed or recommended periods of time.

Parents or carers have a right to ask to see any data that we hold relating to them and/or their child and to request that any errors be corrected. We will respond to all such requests within one month.

If you have any questions or concerns regarding your personal information or our privacy practices please contact Mrs Bradley by phone, text or email. If you wish to file a complaint you can refer this to the Information Commissioners Office.

We comply with the requirements of the General Data Protection Regulation (GDPR) regarding obtaining, storing and using personal data.