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**Summer Programme Enrolment Form**

**Student Details**

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| **Name of Student:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Student DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_\_\_**  **Year Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Preferred Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Student Gender: Male Female** |
| **Ethnicity: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **Preferred Language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Home Address:** | **Disclosed Disability:**  **Yes No**  **If yes; Please provide details:**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Food:**

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| **Food allergies:** |
| **Food dislikes:** |

**Statement Information**

Has the student got a statement?

**Yes No**

Has the Student got a SEN management form?

**Yes No**

If SEN please state the banding level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education Provider Details**

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| **Current School Name:** | **Previous School Name:** |
| **Current School Address:**  **Postcode:** | **Previous School Address:**  **Postcode:** |

**Parent/Carer Details**

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| --- |
| **Name of Parent/Carer:** |
| **Parent Contact Details:**  **Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Office - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode - \_\_\_\_\_\_\_\_\_\_\_\_** |

**Emergency Contact Details**

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| **Name of Emergency Contact:** |
| **Relationship to child: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Emergency Contact Details:**  **Email - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Office - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Address - \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postcode - \_\_\_\_\_\_\_\_\_\_\_\_** |

**Terms and Conditions 2020/21**

*Parents/Carers are strongly advised to read the following terms and conditions thoroughly.*

1. Students may be suspended or given notice at the discretion of the programme coordinator, such reason for this includes behaviour by the student which is deemed to be unacceptable or dangerous or affect the well-being of other students. Any suspension will continue while we address these problems with you.
2. You will immediately inform us if the student is suffering from any contagious illness (including COVID-19), and to prevent the spread of infection to other students, not allow them to attend the programme.
3. The programme coordinator reserves the right to refuse entry to any student which is considered to be unwell or suffering from any contagious or infectious illness. If the student becomes ill we will attempt to contact you. If we are unable to contact you, we will contact the authorised people on your enrolment form. The staff may act in loco parentis for the student in case of illness, accident or emergency. Staff will take such actions as the programme coordinator sees fit, including hospitalization, whether or not the parents/carers or next of kin have been informed. Every possible effort will be made to contact the parents/carers or authorised people.
4. We have the obligation to report to the relevant authorities’ circumstances where we consider a student may have suffered neglect or abuse; we may do so without your consent and/or without informing you.
5. I agree to the use of CCTV/WEBCAM system in the building for monitoring and security purposes. I agree that images on the system may be stored for up to 21 days or longer if required as evidence in any investigation or inquiry.
6. I agree to the use of relevant marketing material such as photographs at JUS Education for the purpose of advertising using internet and other types of marketing for the purpose of advertising.

**I have read and agree to the Terms and Conditions of *JUS Education.***

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name (PRINT): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**