

# Emergency Contact Form

## Child's Details

Child's Surname		Child's Forename (s)	
Date of Birth		Year Group	
Address (main) including postcode			
Adult(s) at this address (and relationship to child)			
Additional address where child regularly spends time e.g. in the case of separated parents or 'shared care'			
Adult(s) at this address (and relationship to child)			

## Contact Details - Parent 1

Title & Name		Relationship to Child	
Address including postcode			Please circle emergency contact priority 1 2 3 4
Parental Responsibility? (Y/N)		Is this person able to collect? (Y/N)	Could the child stay overnight? (Y/N)
Home Number			
Work Number			
Mobile Number			
Email Address			

## Contact Details - Parent 2

Title & Name		Relationship to Child	
Address including postcode			Please circle emergency contact priority 1 2 3 4
Parental Responsibility? (Y/N)		Is this person able to collect? (Y/N)	Could the child stay overnight? (Y/N)
Home Number			
Work Number			
Mobile Number			
Email Address			

**Other Contacts** (Please include at least one contact that does not live at the same address as the child)

Title & Name			Relationship to Child		
Address including postcode				Please circle emergency contact priority 1 2 3 4	
Parental Responsibility? (Y/N)		Is this person able to collect? (Y/N)		Could the child stay overnight? (Y/N)	
Home Number					
Work Number					
Mobile Number					
Email Address					

Title & Name			Relationship to Child		
Address including postcode				Please circle emergency contact priority 1 2 3 4	
Parental Responsibility? (Y/N)		Is this person able to collect? (Y/N)		Could the child stay overnight? (Y/N)	
Home Number					
Mobile Number					
Work Number					
Email Address					

<b>Service Children in Education.</b> Are you, as parents/carers, service personnel serving in regular HM forces or military units of all forces and exercising parental responsibility?	<b>Please circle Yes / No</b>
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Family Doctor (name, address & telephone number of surgery)	
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Name of previous school/nursery	
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Any other information you wish us to know e.g. medical: speech therapy, hearing, general development, allergies.	
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Travel Arrangements (please tick)					
Bus		Car		Cycle	
Walk		Taxi		Other	

**ETHNICITY & CULTURAL INFORMATION** – required for statistical purposes only. This is optional, you have the right to refuse or retract any personal data. Please contact the office if you require any further information.

What is your child's nationality?

What is your child's ethnic group? (please tick)									
White		Mixed		Asian/Asian British		Black/Black British		Other	
British		White/Black Caribbean		Indian		Caribbean		Any other	
Eastern European		White/Black African		Pakistani		African		Refused	
Western European		White Asian		Bangladeshi		Other			
Other		Other		Other					

Please state your child's first language				<input type="text"/>			
If your child's first language is not English please state their proficiency. (please tick)							
New to English		Early acquisition		Developing competence			
Competent		Fluent					

Religion (please tick)					
Christian		Hindu		Jewish	
Muslim		Roman Catholic		Sikh	
No religion		Other religion		Refused	

### School dinners

Children in Reception, Years 1 & 2 receive free infant meals, however if you are entitled to free school meals this brings in additional funding for school to support learning. Please apply on the Calderdale website if you think you may be entitled or ask at the school office for a form.

School Meal Pattern Please see the school website for menus	School Meal (please tick)	Packed lunch (please tick)
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Contact Details of Key Professionals (eg. for child who is CP or CLA– Social Worker/Virtual School, or YOT Worker)

Name		Relationship to Child	
Contact Number			
Additional Number			
Additional Number			
Email Address			
Name		Relationship to Child	
Contact Number			
Additional Number			
Additional Number			
Email Address			

**PARENTAL CONTACT**

As well as regular correspondence directly relating to your child and their education, we occasionally contact parents/carers with information about events or services provided by the school, external organisations or our PFSA which may be of interest to you or your child. Please note we will not share your personal data outside of Lightcliffe CE Primary. Please tick to indicate whether you are happy to receive this information. You can change your mind at any time, just contact the school office

**I am happy to receive information about events/services provided by the school, PFSA or external organisations.**      “YES” - please tick       **OR**      “NO” – please tick

**PRIVACY NOTICE**

Under data protection law, individuals have a right to be informed about how Lightcliffe CE Primary School uses any personal data we hold about them. We comply with this right by providing ‘Privacy Notices’ to individuals where we are processing their personal data. To view this information please visit our website [www.lightcliffeprimary.co.uk](http://www.lightcliffeprimary.co.uk) and select ‘privacy notices’ under the ‘about us’ tab. Privacy notices are also available on request from the school office.

Signed (parent/carer):		Date:
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Date Received in School: \_\_\_\_\_