



Cottenham Primary School Korfball Club Registration Form

Name of Child: _____ Class: _____

Date of Birth: _____ House: _____

Address: _____

Home Phone No: _____

Person to contact in emergency: _____ Relationship: _____

Phone No's in case of emergency: _____

Email of Parent/Guardian: _____

IMPORTANT MEDICAL INFORMATION

Is your child allergic to any drugs? _____

Does your child suffer from any of the following? (please tick)

Asthma _____ Diabetes _____ Epilepsy _____ Other (please specify) _____

Does your child have any other allergies? _____

Is your child on any regular medication? (If yes, please read the attached medication policy. Medications will need to be provided to school **in addition to classroom supplies** for use if needed during the club).

Medication details including dose rate, etc _____

Does your child wear contact lenses? _____

Any other details/medical conditions you would like us to be aware of? _____

**I give permission for my child to walk home
OR**

I will collect my child from the school gates
(Delete as applicable)

In the event of an emergency I agree to the Coach authorising an anaesthetic or any other emergency procedure/treatment in my absence.

Parent/Guardian signature: _____

Print Full Name: _____ Date: _____

CPS Korfball Club Photo Permissions

Please answer ALL questions to give your permission for photos to be displayed. This will also apply to any future photos, e.g. those taken at National Youth Day, future tournaments, etc.

Name of Child _____

Person filling out questionnaire _____

Relationship to child _____

Email address _____

Date _____

PLEASE CIRCLE YOUR ANSWER:

Village Vet Cottenham Waiting Room (Team Kit Sponsors) Yes / No

Local Press (e.g. Cambridge Evening News, Cottenham Newsletter) Yes / No

Within School/School Publications/School Website Yes / No

Public Facebook Pages Yes / No

(e.g. Cambridge Tigers, Cambridgeshire Korfball Association)

Private Facebook Page Yes / No

(Parents/coaches CPS/Cambridge Tigers)

Medication Policy - CPS Korfball Afterschool Club



Written by: Zoe DeBarro
Position: Juniors Coach/Manager

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Disclosure of Medical Conditions

- Parents will be asked to declare all medical conditions and medications required (including dosing instructions) upon registration with the club.
- If children require any medication during club times, eg asthma inhalers, they are asked to provide these separately for the club.

Storage of Medications

- Medications must be clearly marked with the prescription label containing the child's name and dosage instructions.
- They will be stored in a sealed plastic container, specifically for the club's use.
- The box is stored at Cottenham Primary School, in accordance with the school policy for medication use within school.
- The box will be collected at the start of the session and returned

Medications for Matches/Tournaments/Training Sessions Another Venue

- It is the responsibility of parents/guardians to ensure that children bring all necessary medications to matches/tournaments/training session when held off school premises.

Notification of Medication Use

- If a child has needed to use their medication during the club/matches etc, this will be recorded.
- Parents will be informed either verbally on collection or by email (if the child has permission to walk home or is collected by a third party, eg childminder/afterschool club).