



# 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 Korfbal Afterschool Club



Written by: Zoe DeBarro  
Position: Juniors Coach/Manager

Date: 21/08/2024

Review Date: 21/08/2025

## **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).