# How to create a child account



14 Click 'Children'.		
	Home Book Activity Bookings Account Children Contact Us Help <b>?</b> Logout	Î
	Book an activity	
Ahoy Paul Dummy Dummy Warner, 🐣 Welcome back to Aspire Kids Club	You have not registered any children to your account.	
to read more)	Your Bookings	
Account		

15 Click 'A	dd child'.	
	You have not registered any children to your account.	
	+ Add child	
NAVIGATION	ABOUT	STAY IN TOUCH
Home	Aspire Kids Club offers a safe, nurturing, and inspiring environment where your child can grow, learn,	

O Child Details	O Additional details O Co	ontacts O Healthcare Details O Consent
	Enter the required information	to complete your child's profile.
Basic Info		Language Info
First Name* First name	Last Name * paul.warner@aaeg.co.uk Your child cannot have numbers	What language(s) does your child speak? * Select
Date of Birth	name. Gender *	
Select ~	Select ~	

**17** Click 'Next' once all fields are fully completed.

	Language Info		
	What language(s) does your child speak? *		
	English	~	
~	English ×		
		Next	

		info@aaes	.co.uk   0121 663 1979
A spire	Home Book Activity B	ookings Account Children Contact Us	Help <b> </b>
Child Details	ditional details O Contacts		
	Enter the required information to complete	your child's profile.	
Other Info	School	Info	
What is your relationship with the child? *	What is	your childs main school?	
Father	∽ Selec	ct	~
Who does your child live with? *	What is	your childs main class room?	
Select	∽ Selec	ct	~
Who has the parental responsibility of your cl	hild? *		
Select	~		
Are external agencies involved in the care or	support of your child?		
No	~		
Collection Password *			
ooncotton i doomord			

Complete all fields to enter relevant additional information.

**19** Make sure to create a memorable 'Collection Password' which will be required each time your child is collected.

Mother & Father	~	Select
Who has the parental responsibility of your child? *		
Mother & Father	~	
Are external agencies involved in the care or support of your child?		
No	~	
Collection Password *		
Does your child have religious or cultural beliefs?		Additional Info
Religious Info		Do you need to sha



20	If there is	any additional information you would like to share, click this tick box
		Additional Info
		Do you need to share additional information about your child?
		Next
		STAY IN TOUCH

#### 21 Enter the relevant information in the box and click 'Next'.

Additional Info	
Do you need to share additional information about your child? Additional details Is very sensory	
Next	

## 22 Complete all emergency contact details and click 'Add Emergency Contact'.

Ageire	Home Br	ook Activity Bookings Account	Info@aaeg.co.uk   0121 663 1979
Child Details	Additional details	Contacts () Healthcare De	
Enter Emergency Contact Info	Please note that although you can add you your child, you may not be able to make	ur child's emergency contact(s) later after crea a booking until these contacts have been adde	ting d.
	Relationship * ③	First Name * 💿	Last Name * 💿
Title * ⑦			
Title * ③ Mrs	<ul> <li>Mother</li> </ul>	<ul> <li>Emma Dummy</li> </ul>	Test
Title • 💿 Mrs Email ③	Mother Mobile * ®	Emma Dummy	Test

, <b>,</b>	ive auteu as	s many Eme	ergency Conta	acts as you wo	ouid like, click
	Please not your chil	the type of contact you new contacts of te that although you can add y id, you may not be able to mak	your child's emergency contact(s) lat ke a booking until these contacts hav	e you can add er after creating e been added.	Next
Enter Emergency Co	ontact Information				
Title * ③ Select	Relation	iship* ⊚ t	First Name * @	Last Name *	0
Email 💿		Mobile * 💿		Telephone ③	
				Add	Emergency Contact
Added Emergency C	Contacts	Tinter		Add	Emergency Contact
Added Emergency C Name Emma Dummy Test	Email Mobile 07533290	TelephoneC 6237	Child_ChildCollectorContacts	Add	Emergency Contact Remove
Added Emergency C Name Emma Dummy Test	Contacts Email Mobile 07533296	TelephoneC 6237	Child_ChildCollectorContacts	Add	Emergency Contact Remove
Added Emergency C Name Emma Dummy Test	Contacts Email Mobile 07533290	TelephoneC 6237	Child_ChildCollectorContacts	Add	Emergency Contact

24 Complete all Collector Contact Information. Once all fields are completed, click 'Add Child Collector Contact'.

f y 🚥 🗈			info@aaeg.co.uk   0121 663 1979
Astre	Home Book	Activity Bookings Account Ch	Idren Contact Us Help 🎖 Logout
Child Details	Additional details	ntacts O Healthcare Detail	
Enter Collector Contact Information	If you have any existing contacts, selecting the type of contact you woul new contacts or yo Please note that although you can add your chi child, you may not be able to make a book	you can choose to re-use them by d like to re-use, otherwise you can ad u can skip this step. Id's collector contact(s) later after creating you sing until these contacts have been added.	skip
Title * ③	Relationship * (2)	First Name * ③	Last Name * @
Mrs ~	Mother ~	Emma Dummy	Test
Email ③		Telephor	e 💿

Tip! You can add multiple contacts here

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### **25** Once you have entered all possible 'Child Collector Contacts', click 'Next'.

Enter Collector Corr	tact Information				
Enter Collector Con	tact Information				
Title * ③	F	Relationship * ③	First Nar	me* 💿	Last Name * ③
Select	~	Select	~		
Email 💿		Mobile	* ⑦	Teleph	one 🔊
					Add Child Collector Contact
Added Collector(s)					
Name		Email	Mobile	Telephone	Remove
Name Emma Dummy Test		Email	Mobile 07533296237	Telephone	Remove
Name Emma Dummy Test		Email	Mobile 07533296237	Telephone	Remove
Name Emma Dummy Test Paul Dummy Test		Email	Mobile 07533296237 07535059007	Telephone	Remove
Name Emma Dummy Test Paul Dummy Test		Email	Mobile 07533296237 07535059007	Telephone	Remove
Name Emma Dummy Test Paul Dummy Test		Email	Mobile 07533296237 07535059007	Telephone	Remove
Name Emma Dummy Test Paut Dummy Test		Email	Mobile 07533296237 07535059007	Telephone	Remove
Name Emma Dummy Test Paul Dummy Test		Email	Mobile 07533296237 07535059007	Telephone	Remove
Name Emma Dummy Test Paul Dummy Test	ABOUT	Email	Mobile 07533296237 07535059007	Telephone	Remove

26 Please enter your child's doctor/doctor's surgery information and click 'Add Child Doctor Contact', then click 'Next'.

f У 🗖 🖬		info@aaeg.co.uk   0121 663 1979
Aspire CONSTRUCTION	Home Book Activity	Bookings Account Children Contact Us Help <b>?</b> Logout
Child Details	Additional details O Contacts	
	If you have any existing contacts, you can c selecting the type of contact you would like to r new contacts or you can skip Please note that although you can add your child's doctor child, you may not be able to make a booking until the	hoose to re-use them by e-use, otherwise you can add this step. Skip contact(s) later after creating your se contacts have been added.
Enter Doctor Contact Informatio	n	
Name O Dr	Surgery * 💿	Telephone * ③ Add Child Doctor Contact
Child_AdditinalDetails_AddedD	octors_Header	

f y 🗅 🖬		info@aaeg.co.uk   0121 663 1979
Aspire	Home Book Activity Bookings Account C	hildren Contact Us Help & Logout
🔮 Child Deta	ils I Additional details I Contacts I Healthcare Detai	Is O Consents
	Does your child have any dietary needs? (Don't worry you can always add dietary needs after your child has been added)	
	Choose an Option Yes No	
← Back		
NAVIGATION AB	DUT	STAY IN TOUCH
Home Asp Book Activity and Bookings Account	ire Kids Club offers a safe, nurturing, and inspiring environment where your child can grow, learn, thrive!	Unit 6 Holly Park Industrial Estate Birmingham B244 QBB

### **27** Answer the following questions by clicking 'Yes' or 'No'.

28 Select/Enter further details in the pop-ups where relevant, then click 'Add Dietary Need'.

	(Don't worry you can always add dietary needs after your child has been added)
	Choose an Option
	Yes No
Enter Dietary Information	
Select dietary need(s) * ⑦ Select Diet Details * ⑦ Select	Select dietary need(s)
No Gluten Halal Hindu Kosher Vegan Vegetarian Other	
	Add your childs dietary need(s)

Tip! You can add multiple needs on each screen, then click 'Next' to move to the next screen and continue to follow the same process.

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**29** Click 'No' or 'Yes' to select each of your preferred consent settings.

Child Details	litional details 🥥 Contacts	Healthcare Details	O Consents
Child Consents			
Does your child have religious or cultural need Do you consent for your child to be filmed or I consent for plasters to be used on my child I consent to my child watching PG films I consent to my child having medication. I hav I consent to my child receiving help in the bat I consent to my child receiving help in the bat I consent to my child receiving mergency tree I consent for my child to be collected by some	ds? photographed for marketing purposes? In the event he or she had an accident an re completed a medical form in advance hroom if needed (6 years old and under) atments eone in my list of collectors	d requires one	No N/A Yes No N/A Yes
← Back			Create child

<b>30</b> Click 'Create child'.		
plice for marketing purposes:		ī.
ent he or she had an accident and requires one	No N/A Yes	L
	No N/A Yes	L
eted a medical form in advance	No N/A Yes	
needed (6 years old and under)	No N/A Yes	Ū
	No N/A Yes	
ny list of collectors	No N/A Yes	
	Create child	
		-

(i) Tip! Click this twice

#### 31 Click "OK"

