

**Annex 1: Attendance sheet during the school period Education and care service
Stadtbredimus**

Child's name:

Mr/Ms class _____ Cycle: _____

I wish to enrol my child for the following days and times throughout the 2026/2027 school year (Please tick (x) the boxes for the periods of attendance) from 15.09.2026

schedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	Education and childcare service closed (except during school holidays)		Education and childcare service closed (except during school holidays)		Education and childcare service closed (except during school holidays)
16:00-17:00					
17:00-18:00					
18:00-18:30					

Remarks :

Date and Signature of the legal representatives: _____

Annex 2: Irregular attendance form (monthly/occasional) Education and care service Stadtbredimus

Child's name :

Mr/Ms class _____ Cycle : _____

I wish to enrol my child for the following days (Please tick (x) the boxes for the periods of attendance).

For the month of : _____

Attendance sheet for the week from _____ to _____					
shedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	closed		closed		closed
16:00-17:00					
17:00-18:00					
18:00-18:30					
Attendance sheet for the week from _____ to _____					
shedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	closed		closed		closed
16:00-17:00					
17:00-18:00					
18:00-18:30					

Attendance sheet for the week from _____ to _____					
shedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	closed		closed		closed
16:00-17:00					
17:00-18:00					
18:00-18:30					
Attendance sheet for the week from _____ to _____					
shedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	closed		closed		closed
16:00-17:00					
17:00-18:00					
18:00-18:30					

Please submit this form **by the 15th of the month** preceding the first week of enrolment at the latest. The completed form can also be sent by e-mail:

relais.stadtbredimus@croix-rouge.lu. For organizational reasons, we would ask you to register your child for **as many weeks as possible** (e.g. for 4 consecutive weeks, if you receive a monthly work plan).

If necessary, the SEAS may request additional information.

If you do not receive negative notification of your child's enrolment by **5 working** days before the start of enrolment, your child will be enrolled for the hours indicated on the enrolment form. You will not receive confirmation of enrolment.

Date and signature of the legal representatives: _____

Annex 3: Modification / cancellation form Education and care service Stadtbredimus

Child's name : _____

Mr/Ms class : _____ Cycle : _____

I would like to **change** my child's enrolment.

new timetable requested, from/...../ 20..... to/...../ 20.....

Please tick (x) the boxes **for all periods of attendance for the whole week**.

schedule	Monday	Tuesday	Wednesday	Thursday	Friday
7:00-8:00					
8:00 – 12:00	Education and childcare service closed (except during school holidays)				
12:00-14:00					
14:00-16:00	Education and childcare service closed (except during school holidays)		Education and childcare service closed (except during school holidays)		Education and childcare service closed (except during school holidays)
16:00-17:00					
17:00-18:00					
18:00-18:30					

Remarks :

Please submit this form by the **15th of the month preceding** the first week of enrolment at the latest. otherwise it will not be possible to take it into account for invoicing purposes.

The completed form can also be sent by e-mail to relais.stadtbredimus@croix-rouge.lu.

Requests for changes will be considered subject to availability.

If you do not receive a negative reply to your child's request to change his/her registration by no later than 5 working days before the change is to take place, your child will be registered for the times indicated on the change form. You will not receive confirmation of enrolment.

Date and Signature of the legal representatives: _____

**Annex 4: Parental authorization for third parties (other than legal representatives)
 Education and care service Stadtbredimus**

If you wish to authorize a third person (grandparents, siblings, neighbors, etc.) to collect your child from the Education and Childcare Service, you must to have submitted this form 'Parental authorization for third parties'.

Please note that under no circumstances will we let your child leave with a person other than the legal representatives if we do not have parental authorization for third persons!

To be completed and given to the Manager of the Education and Childcare Service.

I, the undersigned, _____,

(surname and first name of father, mother or other legal representative)

mother, father or legal representative of:

Name	First name	Cycle

declare that the following persons are authorized to collect the above-mentioned child from the Reception and Childcare Service.

Name	First name	Telephone
1.		
2.		
3.		
4.		
5.		
6.		

This authorisation is only valid if the persons concerned can identify themselves using their identity cards when collecting the child from the Education and Childcare Service.

Date and signature of the legal representatives: _____

**Annex 5: 'Travel + Clubs' parental authorization Education and care service
Stadtbredimus**

Children have the right to go on their own, with the explicit and written authorization of their legal representatives. The representatives declare that their child is fit to travel alone and assume full responsibility for travel.

This authorization, indicating the exact period of travel, must be given by the legal representatives to the Education and Childcare Service if the children have the right to leave the Education and Childcare Service or to go alone to their sports or musical activity.

This form must be completed and given to the Head of the Education and Childcare Service.

I, the undersigned _____ (Surname and first name of the father, mother or other legal representative) declare that they are fit and authorize the child:

Name	
First name	
Cylce	
Teacher class	

to travel:

- Alone from **home** to the education and childcare service.
- Alone from the education and childcare service to **home**.
- Alone from the education and childcare service to the club _____
- _____.

and I declare that I accept all responsibility for these journeys.

during the period from _____ to _____.

throughout the 2026-2027 school year.

Date and Signature of the legal representatives: _____

Annex 5bis: Request for transportation to a local club

In order to organize after-school transportation as efficiently as possible, we ask that you inform us of any requests for transportation to a local club as soon as possible by submitting this form to the Education and Childcare Service.

By requesting transportation for their child to a local club, parents agree to provide the social and educational staff with all relevant information and/or schedule changes related to the club in question.

The "Parental Authorization for Transportation" form must be completed if the coach is responsible for transportation from the Education and Care Service to a local club and/or from the local club to the Education and Care Service.

Please fill out one form per activity and per club!

My child _____ is enrolled in :

- music school
- _____
- _____

on the following days: _____ and at the times listed

below _____ starting on ___ / ___ /2026.

- I give my consent for the childcare and education service to transport my child **to** their activity.
- I give my consent for the childcare and education service to arrange my child's **return** trip to their activity.
- I give my consent for the education and childcare service to provide transportation for my child **to and from** their activity.
- I give my consent for my child to go there on their own (Please also complete **Appendix 5**)
- I agree to allow my child to remain at the childcare service in the event that their class or practice is canceled
- I give my consent for my child to go on their own from the local club to the education and childcare service after the activity (please complete Appendix 5)

Contact person, course or training coordinator:

NAME : _____

PHONE: _____

Date et signature des représentants légaux : _____

Annex 6: Medication administration form Education and care service Stadtbredimus

To be completed and returned to the Education and Childcare Service Manager, together with the medical prescription.

I, _____, the legal representative of the child _____ born on _____, enrolled at SEAS Stadtbredimus, authorize and delegate the administration of the medication listed below, to SEAS staff Stadtbredimus.

Medication name	
Duration of treatment	from ___/___/___ to ___/___/___
Frequency per day	<input type="radio"/> morning <input type="radio"/> lunchtime <input type="radio"/> afternoon <input type="radio"/> before meals <input type="radio"/> during meals <input type="radio"/> after meals
Number of doses each time	<input type="radio"/> __ tablets <input type="radio"/> __ coffee spoons <input type="radio"/> __ sachets <input type="radio"/> __ globules <input type="radio"/> __ ml
Keep the medicine	<input type="radio"/> in the fridge <input type="radio"/> at room temperature
For the duration of treatment, the medicine must be	<input type="radio"/> take home <input type="radio"/> stay at SEAS

The legal representatives are required to provide a medical prescription stating exactly the dosage to be administered to the child and the duration for which the medicine is to be taken, and to note the child's name on the medicine. A copy of the prescription is essential if the administration of the medicine is to be guaranteed.

This applies to all medicines, including homeopathic medicines and those available over the counter.

As for medicines used to treat allergies (antihistamines), it is specified that they can be administered even before allergic reactions appear in children.

Date and signature of the legal representatives: _____

**Annex 6A : Care product administration form Education and care service
 Stadtbredimus**

To be completed and returned to the Education and Childcare Service Manager.

I, the undersigned _____ (mother, father or other legal representative of the child) of the child _____ born on _____, registered at SEAS Stadtbredimus authorise and delegate the administration of the care product listed below, to the staff of the Service d'éducation et d'accueil «Stadtbredimus» .

Name of care product	
Duration of the treatment	from ___/___/___ until ___/___/___
Frequency per day	_____
Quantity every time	<input type="radio"/> __ pills <input type="radio"/> __ teaspoon <input type="radio"/> __ sachets <input type="radio"/> __ globules <input type="radio"/> __ ml
The care product should be kept	<input type="radio"/> in the fridge <input type="radio"/> room temperature
For the duration of the treatment, the care product has to	<input type="radio"/> be taken back home every day <input type="radio"/> to stay at the SEAS

The legal representatives are required to write the child's name on the care product.

This measure applies to all care products which are available over the counter, including homeopathic products.

Date and signature of the legal representatives: _____

Annex 8: Authorisation for the taking and/or publication of images (photographs or videos) (under-13s) Education and care service Stadtbredimus

This authorization is subject to your signature, for the taking and distribution of the image (photograph and/or video) of your minor child whose identity is given below, within the framework of the activities of the Education and Welcome Service of the Luxembourg Red Cross in which he/she participates and for the methods of use specified below.

Child's name : _____

First name: _____

Education and care service: _____

In order to ensure your child's safety and fulfil our quality control obligations, we may take photographs/films of your child (e.g. 'badge', portfolio, educational poster, etc.). In this case, we need to be able to comply with the Grand Ducal Regulation of 29 July 2017 establishing the national reference framework 'Non-formal education for children and young people'.

AUTHORISATION OF THE LEGAL REPRESENTATIVE

I, the undersigned (first name, surname) _____,
residing at (address) _____:

hereby authorize the non-formal education department of the Luxembourg Red Cross, located at 44, boulevard Joseph II, L-2014 Luxembourg (tick all that apply) :

1. Authorization and use of images

- to photograph or film my child, whose identity is given above, as part of the internal activities (publication within the SEA) of the Luxembourg Red Cross education and reception service in which he/she participates.



If you have not marked point 1, you can ignore point 2.

2. Authorization and use of images outside the daily activities of the SEA

to use, publish and reproduce these photographs, videos or their adaptations, with or without mention of my child's name, for the purposes of illustrating the activities of the Education and Reception Service of the Luxembourg Red Cross for (tick as preferred):

- use of photos and videos as part of ongoing training courses
- the newspaper 'Die Kunterbunte', produced by and for children attending the SEAS/SEAJ
- use of photos in the logbook (internal documentation)
- the distribution of photographs and/or videos on the following media: Luxembourg Red Cross Intranet site(s); Luxembourg Red Cross Internet site(s); publications edited and published by the Luxembourg Red Cross such as activity reports, newsletters, newspapers, brochures, magazines, educational documents, etc.; publications edited and published by third parties (newspapers, magazines and other printed or electronic media).
- the publication of photographs in the 'Gemengebuet' (local newspaper) and on the local website

This authorization, granted free of charge, is valid worldwide. The non-formal education department of the Luxembourg Red Cross will exercise all exploitation rights attached to this audiovisual work/recording, which will remain its exclusive property.

I certify that I have received an information notice relating to the processing of personal data in the form of images (photographs or videos) captured by the non-formal education department of the Luxembourg Red Cross (page 1/2), and that I have read and understood the above information informing me of my rights in relation to the capture and publication of images concerning my child, whose identity is given above, as well as the associated processing of his/her personal data.

I acknowledge that I have full civil rights in respect of the minor named above.

Signed in Luxembourg, on _____

Signature of the legal representatives : _____

Annex 9: General notice on the protection of personal data Education and childcare services of the Luxembourg Red Cross -Education

When you register your child with the 'Stadtbredimus' Education and Childcare Service of the Luxembourg Red Cross, you are asked to provide us with your personal details and those of your child. We attach great importance to the protection of this data. This notice is intended to inform you of the use we make of this personal data and of the rights you have.

WHY DO WE PROCESS THIS DATA?

We process your personal data and that of your child for the purposes of :

- managing your child's enrolment at our school,
- managing your child's attendance and absence,
- managing the catering service
- management of invoicing,
- managing complaints and accident reports,
- management of the school.

This processing is carried out :

- as part of the performance of the contract you have with our establishment,
- in order to comply with a legal obligation to which we are subject,
- as part of our public interest mission,
- on the basis of your express consent in the event that you have provided us with your child's health data (allergies, food intolerances and other pathologies) and in the absence of your express consent, the processing of this health data will be carried out on the basis of your child's vital interests.

WHAT TYPE OF DATA DO WE COLLECT?

In accordance with the law, the non-formal education department of the Luxembourg Red Cross collects only the necessary data. This data is generally that which you have given us on the registration form (your child's first and last name, your address, your telephone number, etc.). Other data may be generated or collected in the course of your relationship with the Luxembourg Red Cross (for example: excursions, outings, etc.).

This data is kept for as long as necessary and for no longer than is required by law.

TO WHOM DO WE COMMUNICATE THIS DATA?

The non-formal education department of the Luxembourg Red Cross treats the data you provide as confidential and only shares it with third parties when necessary and in accordance with the law. These third parties may include other entities of the Luxembourg Red Cross, the Commune of, the competent administrations and authorities, such as the Ministry of National Education, Children and Youth, the Ministry of Health, the National Youth Service, the school as well as service providers, particularly in the context of IT outsourcing. We ensure that your data remains within the European Union.

WHAT ARE YOUR RIGHTS?

In accordance with the law, you have the following rights:

- The right to information. We hope that this notice has answered your questions. Should you require any further information, please contact the person responsible for SEAS 'Stadtbredimus'.
- The right to access data. You can access your data and that of your child by contacting the 'Stadtbredimus' SEAS manager.
- The right to rectify your data and that of your child if it is erroneous or obsolete. You can contact the 'Stadtbredimus' SEAS manager.
- The right to lodge a complaint with the National Commission for Data Protection (CNPD) if you consider that your data is not being processed in accordance with the law.

In certain cases and under the conditions laid down by law, you also have the following rights:

The right to request the deletion of your and your child's data.

- The right to request the restriction of the processing of your data and those of your child.
- The right to object to the processing of your data and those of your child for any other legitimate reason (unless the Luxembourg Red Cross has a legitimate and compelling reason to continue the processing).
- The right to portability of the data you have provided to Croix-Rouge luxembourgeoise (i.e. the right to receive your personal data on a machine-readable form), insofar as this is technically possible.
- The right to withdraw your consent at any time to the processing of your child's health data.

If you have any questions or wish to exercise your rights, you can contact the Head of the 'Stadtbredimus' Education and Care Service by email: relais.stadtbredimus@croix-rouge.lu

If you wish, you can also contact the Data Protection Officer of the Luxembourg Red Cross by e-mail: rgpd@croix-rouge.lu or by post:

LUXEMBOURG RED CROSS

Data Protection Officer

44, boulevard Joseph II

BP 404 L-2014 Luxembourg

In order to comply as fully as possible with the regulations in force, we undertake to update this information notice whenever necessary.

**Annex 10: Autorisation for taking and/or publishing images (photographs or videos)
(minor child under the age of 13)- Education and care service Stadtbredimus-**

(Given to the legal representative(s) of the minor child concerned)

The non-formal education department of the Luxembourg Red Cross attaches great importance to the protection of your child's image rights and personal data in accordance with the General Data Protection Regulation (GDPR).

Your child may be photographed, filmed or recorded by the Non-Formal Education Department of the Luxembourg Red Cross as part of the activities of its Education and Reception Service. In order to allow the non-formal education department of the Luxembourg Red Cross to take and use images (photos or videos) of your child for the purpose of communicating about its activities, we would like to obtain your consent and would like to inform you of your rights beforehand.

The photos and video recordings may be used in printed or digital form on various media through which the Luxembourg Red Cross publishes information relating to the activities of its Education and Welcome Service.

General information :

Data controller: the Luxembourg Red Cross, located at 44, boulevard Joseph II, L-2014 Luxembourg.

Contact: the Data Protection Officer of the Luxembourg Red Cross: rgpd@croix-rouge.lu

Purpose of processing :

- internal communication by the Luxembourg Red Cross (educational work, educational re-thinking, internal newsletters and journals, activity report, intranet)
- external communication by the Luxembourg Red Cross and the press (brochures, magazines, website, the newspaper 'Die Kunterbunte', the 'childhood-youth' logbook).

Legal basis for processing: your consent (art. 6.1a RGPD)

Recipients: photographs and video presentations will be stored on the information system of the Luxembourg Red Cross, access to which is restricted to staff duly authorised by the latter. Your data may also be communicated to third parties such as sub-contractors (in particular IT service providers) and external service providers of the Luxembourg Red Cross (such as graphic designers, press agencies, printers, written media) to the extent strictly necessary.

Retention period: photographs and video recordings will be kept for as long as is necessary for the above purposes.

Your rights:

You may at any time withdraw your consent and request that the Non-Formal Education Department of the Luxembourg Red Cross stop using images (photographs or videos) concerning your child in new media (and not media that have already been published), by contacting the person in charge of the 'XXXXX' Education and Reception Service. If you wish, you can also contact the Data Protection Officer of the Luxembourg Red Cross by e-mail: rgpd@croix-rouge.lu.

For more information on how the Non-Formal Education Department of the Luxembourg Red Cross processes your personal data or to find out about your rights, please consult our information notice for beneficiaries of the Luxembourg Red Cross Education and Reception Service at the following address: <http://www.croix-rouge.lu/protection-des-donnees/>.

**Annex 11 : Autorisation Dimmi App
Education and care service Stadtbredimus**

Dear legal representatives,

SEAS Stadtbredimus is pleased to offer you the use of the “Dimmi” application, which can be downloaded on iOS and Android devices.

‘Dimmi facilitates communication between legal representatives and SEAS.

It gives you quick and easy access to messages, forms, registration reminders, menus and other SEAS publications. Photos and short presentations of your child's activities are also published regularly. Please note that reminders (holiday registrations, celebrations, etc.) will only be posted on the Dimmi application. Photos and videos sent by the educational staff are sent exclusively to the legal representatives via the ‘Dimmi’ application.

Only the surname and first name of the child and the email address of the legal representatives are stored by the application provider, EducDesign S.A.

We invite you to visit the ‘Dimmi’ application website at www.dimmi.lu for further information on how the application works and on data protection provisions.

Use of the application is, of course, not compulsory and only legal representatives who provide us with the authorisation below will be given two QR-Codes enabling them to connect to ‘Dimmi’.

Please note that the two QR-Codes are allocated to each child and that only the child's legal representatives are authorised to connect to the application. For security reasons, we reserve the right to block access to the application in the event of abuse.

We look forward to meeting you on Dimmi.

I, the undersigned (mother, father, legal representative of the child)
_____, residing at (address)
_____, (mother, father,
legal representative) of (surname and first name of the child)

_____ wish to have access to the Dimmi application and hereby authorise the Maison Relais and Crèche Service of the Luxembourg Red Cross, located at 44, boulevard Joseph II, L-2014 Luxembourg (tick all boxes) :

1. Authorisation to take photographs

to photograph or film my child, whose identity is given below, as part of the activities of the Luxembourg Red Cross Non-Formal Education Service in which he/she participates.

2. Authorisation to use images

to photograph or film or to use and publish these photographs, videos or their adaptations in the Dimmi application, without mentioning my child's name, for the purposes of illustrating the activities of the SEAS ' Stadtbredimus'.

This authorisation, granted free of charge, is valid for the duration of the child's enrolment at the SEAS Stadtbredimus.

The Non-Formal Education Service of the Luxembourg Red Cross will exercise all exploitation rights attached to this audiovisual work/recording, which will remain its exclusive property.

I certify that I have received an information notice relating to the processing of personal data in the form of images (photographs or videos) captured by the Non-Formal Education Service of the Luxembourg Red Cross (page 1/2), and that I have read and understood the aforementioned information informing me of my rights in relation to the capture and publication of images concerning my child, whose identity is given above, as well as the associated processing of his/her personal data. The content of the Dimmi application may not be published outside it.

I acknowledge that I have full civil rights in respect of the minor named above.

I would like to receive two QR codes to access the Dimmi application.

I agree not to publish photos of other children.

Signed in Luxembourg, on ____/____/____

Signature of legal representatives : _____

Annex 12: Cancellation of registration contract

I, the undersigned,

Mrs :

Mr:

Child's legal representatives :

Childs name :

cancel the registration contract with effect from the SEAS Stadtbredimus:

Date of child's last day in the service :/...../.....

the one-month notice period being respected.

Date and Signature of legal representatives: _____

For information: If you cancel the registration contract, it is up to you to revoke the direct debit order, taking into account the notice period (one month) which will still be charged to you.