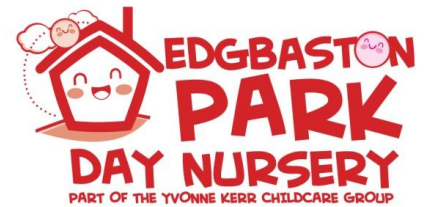


# Registration Form – Before & After-School

**PLEASE COMPLETE & SIGN ALL SECTIONS**

All of our policies and procedures are available to view, please feel free to request them.



Today's date: DD/MM/YYYY

Payment	Paid on:
£30 Administration Fee	<u>DD/MM/YYYY</u>
First week's fee (Amount: £ )	<u>DD/MM/YYYY</u>

Child's Start Date: DD/MM/YYYY

Child's Final Attendance Date: DD/MM/YYYY

## Child's Details

Child's Full Name:		
Child's Preferred Name:		Date of Birth:
Religion:	First Language:	Ethnicity:
Address:		
School:	Year: Class:	Name of Form Teacher:

## Parent(s)/Carer(s)

<b>Mother's Full Name:</b>	
Daytime Tel No:	Mobile No:
Email:	
Home Address:	Work Address:
<b>Father's Full Name:</b>	
Daytime Tel No:	Mobile No:
Email:	
Home Address:	Work Address:

## Primary Contact in the Event of an Emergency

Name:	Relation to child:
Tel No:	Mobile No:
Email:	
Address:	

Name of Doctor's Surgery/Doctor's Name:	
Surgery Address:	
Postcode:	Tel No:

Please list the vaccinations your child has received: .....

.....

	Seen by	Date seen
Personal Child Health Record (PCHR) or "Redbook" proof of vaccinations		

Please give details of any dietary requirements and/or food allergies for your child: .....

.....

.....

Please give details of any health problems: .....

.....

Please give details of any additional needs your child may have: .....

.....

.....

**MEDICAL CONSENT GIVEN BY PARENT(S)/CARER(S)**

In the event that your child needs emergency medical help, **it is our duty to call 999 first and you second.** In all cases, a qualified member of staff will travel with your child in the ambulance to the hospital and will meet you there. In the event of treatment being necessary whilst your child is in our care, parents/carers will be contacted, if possible, before such treatment is sought.

Signed (parent(s)/carer(s)):

Print Name:

.....

.....

Please state any more relevant information we may need to know about your child:

.....

.....

.....

**\*\*\*\*PLEASE ENSURE THAT YOU NOTIFY THE NURSERY OF ANY CHANGES TO THESE DETAILS\*\*\*\***

DROP OFF SERVICE: please state the approximate time of arrival to nursery: .....am

PICK UP SERVICE: please state the approximate time of collection from nursery: .....pm

Please indicate what times your child needs to arrive at school what times they need to be collected:

MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY	
Arrival	Collection	Arrival	Collection	Arrival	Collection	Arrival	Collection	Arrival	Collection

Who will be the main person/people dropping/collecting your child to/from nursery (please note their relation(ship) to your child)?

.....

**Please notify the nursery if anyone other than those named above will be collecting your child on the day your child is being collected by them. We recommend that you provide this person with a password, which you also tell your child's key practitioner and nursery management, so that we may confirm with the person that they are who they say they are.**

**Use of your child's photograph for display purposes in the nursery and for quarterly newsletters**

From time to time we will use photographs of your child in the nursery for displays showing their work, in our nursery news letter and interaction with the other children and staff. These images may be given to you or stored in our secure archive once your child stops attending the setting.

Signed: ..... Print name:.....

Date: .....

I am signing to state that I (parent/carer) have no objections to photographs of my child being used for the nursery's quarterly newsletter, which will be circulated to all parents/carers.

*Please note if photographs of your child are included in the newsletter, their name will not be included.*

Signed: ..... Print name:.....

Date: .....

**Consent for Trips & Outings**

I am signing to state that I (parent/carer) have no objections to my child being taken out by qualified staff on ad hoc outings to the park or the local shops. For all other scheduled trips, consent letters will be sent out in advance.

Signed: ..... Print name:.....

Date: .....

**Ofsted**

We are registered with Ofsted and abide by their guidelines. It is Edgbaston Park Day Nursery’s policy to always care for your child in the best possible way.

Please sign to state that you understand that if a practitioner in the nursery, suspects that a child in their care may have been subjected to abuse or neglect, they have a duty to report this to the Ofsted Area Office.

**Signed (parent(s)/carer(s)):**

**Print Name:**

.....

.....

.....

.....

Is your child known to any Social Services agency? If yes, please provide details.

.....

.....

**Safeguarding Children and Legal Parental Responsibility**

*In the case that you are no longer married, cohabiting or in a relationship with your child’s father/mother please read the following:*

Please notify us if there are any legal interventions in place which prevent a parent/carer from collecting your child from the nursery. As part of our own and the Early Years Foundation Stage’s (EYFS) policies on Safeguarding, we must ask for your signed confirmation as to who has parental/carer responsibility for your child.

Please provide the full names and relations to your child of the person/people who have parental/carer responsibility for your child:

.....

.....

Are there any legal interventions, restraints which prevent either parent from being able to collect the child from the nursery setting (if so, please provide a copy of the legal documentation): **Yes / No**

Aside from yourself, who else has permission to collect your child from nursery (please provide their full names and relation to your child and use the password system, if they are to collect your child):

.....

.....

Signed: .....

Print name:.....

Date: .....

**Fee Structure**

Fees cover the weekly costs of drop off and/or collection, breakfast, afternoon tea, drinks and snacks.

	<b>Before and/or After School</b>
<b>Weekly</b>	£90.00
<b>Drop off and Pick up</b>	£18.00
<b>Drop off or Pick up</b>	£9.00

**All fees are to be paid in advance and not in arrears - fees that are paid late will attract a 5% late payment charge and returned cheques will attract a £12.50 additional charge.**

Please see your Information Pack for more details about fees and payment terms and conditions.

**Fee Payment Agreement**

I/We have read the full terms and conditions regarding the payment of fees, detailed in the Nursery Information Pack. I/We accept to pay the fees according to these terms and conditions for the attendance of the aforementioned named child at The Playhouse Day Nursery.

Signed: ..... Print name:.....

Date: .....

Signed: ..... Print name:.....

Date: .....

**Policies & Procedures Agreement**

I am/We are aware that there are - a full set of Policies and Procedures by which the nursery operates and these are available for me to see whilst using the services of the nursery.

Signed: ..... Print name:.....

Date: .....

Signed: ..... Print name:.....

Date: .....

**For marketing purposes, please tell us how you heard about Edgbaston Park Day Nursery:**

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