

REGISTRATION FORM



INFORMATION ON THIS FORM WILL BE TREATED IN THE STRICTEST CONFIDENCE

CHILD'S FULL (legal) NAME.....BOY/GIRL

ADDRESS:

.....Postcode:

DATE OF BIRTH POSITION IN FAMILY (i.e. 1st).....

EVIDENCE OF NAME & D.O.B. (Document Witnessed/Document Number & Staff Signature)

.....

MOTHER'S FULL NAME..... FATHER'S FULL NAME.....

ADDRESS:..... ADDRESS.....

TOWN..... TOWN.....

POSTCODE..... POSTCODE

TEL. HOME..... TEL. HOME.....

WORK..... WORK.....

MOBILE..... MOBILE.....

EMAIL..... EMAIL.....

Parental responsibility: yes/no(delete) Parental responsibility: yes/no(delete)

Legal contact: yes/no (delete) Legal contact: yes/no (delete)

National Insurance Number:

This is needed to ensure that the nursery receives the correct level of funding for your child when they are entitled to the 2-year funding/15 universal/30 extended hours funded nursery provision.

OTHER (e.g. Stepfather/Stepmother/Legal Guardian etc)

NAME:

ADDRESS:

TEL NO..... MOBILE NO.....

Parental responsibility yes/no(delete) Legal contact yes/no (delete)

CHILD'S ETHNICITY (optional) Signature for consent given

FAMILY RELIGION (optional)..... Signature for consent given

LANGUAGES SPOKEN BY FAMILY & CHILD.....

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MEDICAL CONSENT: I authorise Primrose Hill Nursery staff to act in loco parentis in the event of my child requiring medical treatment where a delay in obtaining my signature may result in endangering the health of my child. (Please state any exceptions)

.....
Signed.....

NAME & ADDRESS OF DOCTOR

.....

Has your child had all the infant inoculations? Yes/no

NAME & ADDRESS OF CHILD'S DENTIST

.....

SPECIAL NEEDS (medical conditions, allergies, medication, SEND, Dietary Requirement/Restrictions)

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Are any of the following in place for the child:

My Plan - My Plan Plus - Education/Health Care Plan - Statement

Other settings attended (including days, Key Person, childminder).....

.....

Emergency contact details (other than parents)

Name: Name.....

Relationship to child: Relationship to child.....

Tel nos: Tel nos:

Additional persons authorised to collect child (must be over 16 years of age)

Name: Name :

Relationship to Child: Relationship to Child :

Tel nos : Tel nos :

Name: Name.....

Relationship to child: Relationship to child.....

Tel nos: Tel nos:

REGISTRATION FORM

I give my authority for the staff of Primrose Hill Nursery to:-

- a) Take responsibility for my child during nursery times.
- b) Take my child on outings or visits.
- c) Take photographs of my child whilst at Nursery.
- d) Make observations of my child for the purpose of assessment and training courses.
- e) Seek contribution from other settings to inform the ongoing assessment process for my child in accordance with the EYFS.
- f) To discuss your child's development with the health professionals as necessary.
- g) Pass assessment records onto school unless requested in writing not to do so.

Signed by parent Date

ADDITIONAL CONSENTS AND PERMISSIONS

Privacy Notice – GDPR 2018

I confirm that I have read and understood the Privacy Notice and agree to Primrose Hill Nursery using and storing my data as set out therein Yes/No

Photographs of my child

I give permission for Primrose Hill Nursery to use photographs of my child taking part in nursery routines and play activities. This could include uploading to our website and social media e.g. Nursery Facebook Page as well as using in their own and other children's Learning Journals/Displaying in Nursery and for staff training purposes Yes/No

Nappy Changing & Use of Wipes/Nappy Cream:

I give permission for Primrose Hill Nursery staff to use baby wipes and Nappy Cream (if supplied) on my child in accordance with the 5.1.4 H&H Nappy changing Policy. (for more details see Welcome Pack) Yes/No

Sun Cream:

I give permission for Primrose Hill Nursery staff to apply sun cream to my child as and when required. (for more details see Welcome Pack) Yes/No

Infectious Diseases:

I confirm that I have read & received a copy of the infectious diseases information. (for more details see Welcome Pack) Yes/No

Policies:

I confirm that I have read and understood the Primrose Hill Nursery Policies and Procedures available on the website www.prhn.co.uk . I know I can access them in the nursery if I need to. Yes/No

Attendance Contract:

I confirm that I have read and I agree to the terms and conditions of the Attendance Contract. (see Welcome Pack) Yes/No

Contact via E-Mail:

I agree to Primrose Hill Nursery contacting me and sending information (including their child's report) to me via e-mail and my e-mail address is:

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Signed by parent Date