

Registration Form

Child's Details	
Child's full name:	
Date of Birth:	Birth certificate seen: Y / N
Main address:	
Does the child live at any other address?	Y / N (If yes, please give details)
Who has parental responsibility for the child?	

Ethnic origin of child	
Nationality of child	
Religion	
What is the main language spoken at home?	
Does your child speak any other languages?	
Does your child have any dietary requirements?	

Starting Sessions					
	Monday	Tuesday	Wednesday	Thursday	Friday
Morning Session					
Afternoon Session					

Parent/Carers Contacts	
Parent 1	Name: Date of Birth: Phone number: Address: Email address:
Parent 2	Name: Phone number: Address: Email address:

Any other Emergency Contact Details (Not Parent)	
Please supply at least one	
Name: Relationship to child: Telephone number:	
Name: Relationship to child: Telephone number:	

Should your child ever need to be collected by a person unknown to us, the following password must be quoted.
 Please do not make this password be known to your child

Please list below the names of the people that you give permission to collect your child from Preschool.	
Name	Relationship to child

Medical Information		
Does your child have any medical conditions?	Y / N	<u>Details</u>
Does your child have any allergies?	Y / N	<u>Details</u>
Does your child have any involvement with outside professional agencies e.g. speech and language therapist, social worker, paediatrician?	Y / N	<u>Details</u>

Doctors and other professional information	
Family Doctors	NHS Number: Doctors name: Address: Telephone

Permissions	
Do you give permission for a member of staff to change the child's nappy/clothing and apply nappy cream when required?	YES / NO
Do you give permission for your child to be taken to the doctor or hospital in an emergency?	YES / NO
Do you give us permission to share information, if necessary, with outside professional agencies? - This includes Social Services, Speech and Language therapists, Health Visitors, Primary schools etc	YES / NO
Do you give permission for members of staff to take photographs of the child at preschool for their learning journals and displays?	YES / NO
Do you give permission for photographs of your child to be placed on social media? Please note, your child's name or any other personal information will never appear online	YES / NO
Do you give permission for the child's photograph to be used on our website?	YES / NO
Do you give permission for the child's learning journal to be uploaded onto Tapestry?	YES / NO
Do you give permission for your child's photograph to be included in other children's learning journal e.g. if we take a photograph of them playing together?	YES / NO
Do you understand that you should not share or upload any photographs from tapestry that include other children?	YES / NO

Do you give permission for a member of staff to reapply sun cream to the child when necessary?	YES / NO
Do you give permission for the child to be taken on local outings? Additional parental consent will be collected if the outing is further afield or includes public transport.	YES / NO
Does your child attend any other childcare setting?	YES / NO
If yes, do you give permission for Preschool to contact them to discuss your child's development?	YES / NO
Do you have a copy of our policies and procedures?	YES / NO
Would you like these to be resent by email?	YES / NO

<u>Parent 1 signature</u>		<u>Date</u>	
<u>Parent 2 signature</u>		<u>Date</u>	
<u>Manager Signature</u>		<u>Date</u>	