

Please put a recent photo here.

Registration Form

Child's Name as on birth certificate:		Date of Birth:	Child known as, if different from birth cert Male or female? M/F
Religion:	Ethnic Origin(Optional)	Child's First Language: Other languages:	
Home Address: Home Telephone number		Second address:	
Name of parent(s)/guardian(s): Who has legal contact? Who has parental responsibility? To which email address below would you like main communications/ invoices sent? Are there any court orders relevant to this Child? Yes/No			
Name of parent/guardian 1:.....		work Address: Email address: Occupation: Work landline:	
Name of parent/guardian 2:.....		work Address: Email address: Occupation: Work landline:	
NAME(S) OF PEOPLE AUTHORISED TO COLLECT YOUR CHILD:			
Name:	Relationship to child:	Telephone Number	
IN AN EMERGENCY, PLEASE CONTACT:			
Name:	Relationship to child:	Telephone Number:	
I GIVE MY CONSENT TO THE NURSERY FOR ANY PHOTOGRAPHS BEING TAKEN – online learning journals and photos used on display boards.			
Signed (Parent/Guardian):		Date	

I HAVE READ AND UNDERSTAND THE NURSERY COMPLAINTS PROCEDURE (nursery parents board)

Signed (Parent/Guardian):

Date:

Please record a password. This password must be a memorable word that is to be used if anyone else is collecting your child(ren). Please inform us if anyone else will be picking up. The password is:

Please complete the following information regarding The early years pupil premium (**EYPP**). We will use this information to contact the local authority to see if there is additional funding for your child. By putting the following information in the boxes below you are giving the setting permission to contact BANES on your behalf. In regard to our Data Protection Policy, this information will only be used for this purpose. The early years pupil premium (**EYPP**) is additional funding for early years settings to improve the education they provide for 3- and 4-year-olds. Early years providers are any organisation offering education for children aged under 5, including nurseries.

<u>Parent name:</u>	<u>Date of birth:</u>	<u>National insurance number:</u>	<u>Sign:</u>
<u>Parent name:</u>	<u>Date of birth:</u>	<u>National insurance number:</u>	<u>Sign:</u>

MEDICAL INFORMATION

Childs name:	
Has your child a disability?	Is any special access required?
Child's Doctors Name:	Child's Health Visitors Name:
Doctors Address:	Health Visitors Address:
Telephone Number:	Telephone Number:
Does your child have any allergies?	
Does your child take medication regularly? If yes - please give details.	

Does your child have a special diet or cultural needs? If yes - please give specific details & whether is preference, allergy or an intolerance?	
Are ALL your child's inoculations up to date? Please give specific details of what has had/not had or plan to have-	
Has your child actually had (had the illness of): MUMPS Yes/No CHICKEN POX Yes/No MEASLES Yes/No	
Is there any other information you feel the Nursery should know: Please be aware that we are always happy to discuss any issues. Please DO ask if you need a private meeting Home visits can always be arranged if needed.	
I GIVE MY CONSENT TO MY CHILD RECEIVING ANY MEDICAL TREATMENT WHICH IS URGENTLY NECESSARY, EXCEPT FOR:	
Signed (Parent/Guardian):	Date:
I UNDERSTAND THAT ANY CARER/STAFF MEMBER WHO SUSPECTS THAT A CHILD IN HIS/HER CARE MAY HAVE BEEN ABUSED OR NEGLECTED, HAS A DUTY TO REPORT THIS TO THE SOCIAL SERVICES DEPARTMENT.	
Signed (Parent/Guardian):	Date:

Child's Name:	
I GIVE MY CONSENT TO THE NURSERY FOR : Short outings and walks in the vicinity. I will provide own named suncream and named nappy rash cream as appropriate.	
YES / NO Signed (Parent/Guardian):	Date:
I understand that medicines can only be administered by the nursery when signed consent is given. This includes the use of calpol and Nurofen.	
Signed (Parent/Guardian):	Date:
I AGREE TO GIVE THE NURSERY 1 CALENDER MONTHS WRITTEN NOTICE IF MY CHILD IS REDUCING HOURS OR CANCELLING HIS/HER PLACE. I UNDERSTAND THAT THIS IS NOT APPLICABLE IN THE FINAL TERM OF THE NURSERY SCHOOL YEAR.	
Signed (Parent/Guardian):	Date:
I UNDERSTAND THAT WITH A MONTHS NOTICE, I CAN TAKE UP TO 4 WEEKS 50% RATE THROUGHOUT THE YEAR. I WILL BE CHARGED FOR BANK HOLIDAYS (EXECPT CHRISTMAS DAY, BOXING DAY AND NEW YEARS DAY AS WE ARE CLOSED ON THESE DAYS.	
Signed (Parent/Guardian):	Date:
I give consent for photos to be used on Social Networking sites for parents use only. This includes Facebook and our Website. Facebook is managed by the management team at Mulberry Kidz. Friends we have on our Facebook consist of parents and staff. Photos are used specifically to enhance communications with our families.	
Facebook YES / NO	Signed (Parent/Guardian):
Website YES / NO	Signed (Parent/Guardian):
	Date:
	Date:

PLEASE INDICATE WHAT YOUR CHILD'S ATTENDANCE WILL BE AT NURSERY:
 (Include the approximate start and finish times that you would like or sessions thankyou)

	Breakfast club 7.30am-8.15	Required attendance times (sessional between 7.30 & 6pm)	Starting as of:-	Would you like a call to discuss ?	After school club
Mon					
Tues					
Wed					
Thurs					
Fri					

Required date of Entry:

**Amount of Deposit Paid: £
 How paid (i.e. cheque?)**

Booking fee (confirmation of place): £50 (includes two settling in sessions). Non-returnable.

Total Paid :

(Please make cheques payable to Mulberry Kidz)

Signed (Parents/Guardians):

Date:

Bath & North East Somerset Social Services regulations require we obtain a copy of your child's birth certificate. Please bring this with you on your child's first settling in session. Copy supplied for child's file: yes/no

Please make a note of the following website to find out if you may be entitled to 30 hours funding for your child(ren).

<https://www.childcarechoices.gov.uk/>

<http://www.childcareworks.co.uk/about>

<https://www.gov.uk/childcare-calculator>

These websites will help you to keep the cost of childcare as low as possible.

For further information, please see the nursery manager.