

For Office use only

Tax Free Childcare reference number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

30 hours reference number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

# Enrolment Form



- Childs Details**

First Name..... Middle Name.....Surname.....

Male/Female                      Date of birth                      /                      /

Collection password .....

Religion .....

Nationality .....

First Language ..... Language spoken at home .....

Who has parental responsibility?.....

Does your child attend any other childcare setting?.....

Please name any other agencies that are currently involved in your child or family? .....

- Primary Carer**

Relationship to child.....

First Name ..... Surname.....

Email address .....

Address.....

..... Post code .....

Contact number ..... Mobile number.....

- Second Contact**

Relationship to child .....

First name ..... Surname.....

Contact number .....

- Emergency Contacts**

Name ..... Relationship to child..... Contact.....

Name ..... Relationship to child..... Contact.....

- Doctors Details**

Surgery ..... Health Visitor .....

Contact Number .....

- Permissions:**

Outings Yes/No                      Nappy cream Yes/No                      Hypo allergenic plasters Yes/No

Administer of Calpol Yes/No      Prescribed Medication Yes/No              Emergency Medical attention Yes/No

Permission for sharing information with other agencies about my child’s wellbeing or health? Yes/No

Permission for sharing information with other providers if my attends more than one setting? Yes/No

Permission for images of my child to be printed/displayed for use within the nursery as a record of learning? Yes/No

Permission for images for my child to be used in the following.....

In the press Yes/No   Website Yes/No   Closed Facebook group Yes/No

- Medical information**

Allergies? .....

Dietary?.....

Medical conditions?.....

Are your child’s Immunisations up to date?   Yes/No

- Sessions**

All year round/ Term time only

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Full day					

Full day 8-6 £49.00      Short Day 8-4/9-5 £41    Morning 8-1 £28.50      Afternoon 1-6 £27    Hourly rate £5.50

Signing this form confirms your acceptance of the terms and conditions

Signed .....

Name .....

Date ...../...../.....