

## Registration Form

A: Details and History of Child			
<b>Surname:</b>		<b>First name:</b>	
<b>Known as:</b>		<b>Date of Birth:</b>	
<b>Sex:</b>		<b>Religion:</b>	
<b>Nationality:</b>		<b>First Language:</b>	
<b>Doctor:</b>	Name: _____ Tel No: _____ Address: _____		
<b>Medical History:</b>	Please indicate if your child had been vaccinated against the following:  Tetanus:                YES/ NO                Diphtheria:                YES/ NO Chicken Pox:            YES/ NO                Whooping Cough:        YES/ NO Poliomyelitis:         YES/ NO                MMR:                        YES/ NO HIB (Meningitis):    YES/ NO		
	Has your child had any infectious illnesses? If so please provide details below  ..... ..... ..... .....		
	Does your child have any allergies / sensitivities? If so please provide details below  ..... ..... ..... .....		
<b>Food</b>	Food intolerance/ Sensitivities	Food forbidden by religion or culture	
<b>Other special needs:</b>			

**B: Details of Parents/ Guardians / Carers****Parent / Carer 1**

<b>Name</b>		<b>Relationship</b>	
<b>Address:</b>		<b>Email Address</b>	
<b>Home No:</b>		<b>Mobile No:</b>	
<b>Work Address</b>		<b>Work No:</b>	

**Parent / Carer 2**

<b>Name</b>		<b>Relationship</b>	
<b>Address:</b>		<b>Email Address</b>	
<b>Home No:</b>		<b>Mobile No:</b>	
<b>Work Address</b>		<b>Work No:</b>	

**C: Emergency contact numbers  
(other than Parents / Guardians / Carers)**

<b>Contact 1</b>	<b>Name:</b>	<b>Tel No:</b>
	<b>Relationship:</b>	<b>Mobile No:</b>
<b>Contact 2</b>	<b>Name:</b>	<b>Tel No:</b>
	<b>Relationship:</b>	<b>Mobile No:</b>

**D: Child Care Sessions Required**

**Start Date** ..... (Please take into consideration a one week settling in period before this)

**Your Preferences and Requirements**

Which would be the preferred days you would like your child to attend?

We can offer childcare sessions within the set booking patterns which are outlined below. The booking patterns enhance a more highly efficient and organised nursery however, most importantly the children are settled during their transition period in our care.

The session patterns can be booked as follows:

- 2 day session: either Monday and Tuesday OR Thursday and Friday
- 3 day session: either Monday to Wednesday OR Wednesday to Friday
- 4 day session: Monday, Tuesday, Thursday and Friday
- 5 day session: Monday to Friday

**Please tick the session that you require**

**Times**

We offer the normal hours of 8.00am to 6.00pm and Early Bird hours of 7.30am to 6.30pm.

8.00am to 6.00pm                       7.30am to 6.30pm

**Please tick the times that you require**

**Your Flexibility**

Meeting your requirements is important to us, in the event we are at full capacity on your chosen days:

- Can you accept different days of the week?                      Yes / No
- Can you initially accept fewer days until your chosen days are available?                      Yes / No

**Information about why we offer these childcare sessions:**

In our professional experience and opinion, we feel that having a child in our care for only one day a week does not allow the child to settle into our environment as they forget the routine, staff, other children and can become very distressed saying goodbye to their parents each week. Therefore, we have implemented a minimum of two consecutive days' sessions of childcare; this is enough to allow the child/children to feel happier during the transition period from home to nursery, thus making a more pleasant and smoother experience for all.

As we do not provide a one day session, in turn we cannot offer a four day session due to planning and operational constraints within this setting. The only 'four day' option we have available is: Monday, Tuesday, Thursday and Friday (every day but Wednesday) because this is technically both of our two day options put together.

To ensure that the well being of the children in our care is safeguarded, we have strict policies covering certain aspects of childcare. It would therefore be helpful if you would sign and date each section below and overleaf, in the spaces provided in order to give us authorisation. This form will be kept in a prominent position in your child's file. Thank you for your co-operation.

<b>E: Medication and Medical Help</b>	
I / we understand and agree any medication brought onto the premises must be <b>PRESCRIBED</b> medication and the child be brought in a minimum of <b>72 hours (3days)</b> after medication is first administered	Sign ..... Date.....
In the event of my / our child requiring a course of prescribed medication, I / we give Pitta Patta Day Nursery permission to administer the necessary medication. (Following guidelines clearly labelled on the bottle)	Sign ..... Date.....
In the event of an accident and my/our child requiring emergency medical treatment, I / we consent for a member of staff to take the child to a G.P or hospital, after being informed.	Sign ..... Date.....
In the event of my/our child suffering a high temperature I / we give consent for nursery staff to administer Calpol. I / we confirm that the child does not have an allergy to Calpol.	Sign ..... Date.....

<b>F: Trips and Outings</b>
I / we give consent for my / our child being taken out of nursery on day trips and outings.  Sign..... Date.....

<b>G: Human Rights</b>
I / we understand that on occasions the nursery's activities may involve face painting therefore, I / we give consent for my / our child to be involved.  Sign..... Date.....
I / we give consent for my / our child to be photographed. The photographs can be used within the nursery for displays and in the nursery newsletter which is sent out to parents/carers. YES / NO I / we give consent for my / our child to be videoed. (If other parents are filming their child's birthday in the nursery. YES / NO  Sign..... Date.....

**H: Policies and Procedures**

I / we can confirm that I have read and understood the Terms and Conditions and that all Policies and Procedures set out here at Pitta Patta Day Nursery are available for inspection in the nursery office	Sign ..... Date.....
I / we have read and understood the late collection policy.	Sign ..... Date.....
I/ we have read and understood the webcam policy.	Sign ..... Date.....
I/ we agree to the outing and transport policy. On occasions weather permitting we visit local museums and parks etc.	Sign ..... Date.....
I/ we accept there is a policy purchase for a Nursery T-Shirt and Red Rucksack at the cost of £15.00.	Sign ..... Date.....

**Provide a Password**

In the event that your child should need to be collected by another person: .....

**I: Declaration**

I / We have read and agreed to the terms and conditions for a nursery placement for my / our child.

I / We have made payment for the registration fee of £85, either enclosing cash, or via BACS to account number: 01199378, Sortcode 30 98 42, using the reference of your child's surname followed by 555, for example Smith 555.

Signature..... Print name..... Date.....

Signature..... Print name..... Date.....