

Registration Form

Personal details			
Name of child			
Date of birth			
Home address			
Postcode			
Воу		Girl	
Religion			
Ethnic origin			
Nationality			
Language(s) spoken at home			
How did you hear about: Little Leaf Nursery?			
Birth Certificate seen	Yes	No	
Name of previous nursery / playgroup attended or other please specify			
Any other information you which to share with us?			
Preferred password to be used by others authorised to pick up your child			
Preferred start date			

Normal Sessions (Please tick preferred days & sessions)

Term-time only (38weeks) or Fulltime (51weeks): (delete if applicable)

Sessions	Monday	Tuesday	Wednesday	Thursday	Friday
7.30am - 6pm					
7.30am -12.45pm					
12.45pm - 6pm					

2-year-old funding only (38 weeks)

Sessions Required (Please tick preferred days & sessions)

Sessions	Monday	Tuesday	Wednesday	Thursday	Friday
8am-6pm					
8am-1pm					
1pm-6pm					
8.30am – 11.30am					
12.00pm – 3pm					

3-year-old funding only (38 weeks)

Sessions Required (Please tick preferred days & sessions)

Sessions	Monday	Tuesday	Wednesday	Thursday	Friday
8am-6pm					
8am-1pm					
1pm-6pm					
8.30am – 11.30am					
12.00pm – 3pm					

For office use only

Registration fee paid	
Date	
Deposit paid	
Date	

2 year old funding only (No registration or deposit required)	
3 year old funding only (No registration or deposit required)	

About your family

Mother/Carer	
Title	
First name	
Surname	
Home address	
Postcode	
Home telephone number	
Mobile	
Email	

Work address	
Postcode	
Work telephone number	
Responsibilities	Parental responsibility Payment of fees
(Tick all that apply)	Collect child from nursery Emergency Contact

Father/Carer		
Title		
First name		
Surname		
Home address		
Postcode		
Home telephone number		
Mobile		
Email		
Work address		
Postcode		
Work telephone number		
Responsibilities	Parental responsibility Payment of fees	
(Tick all that apply)	Collect child from nursery Contact in emergency	

Emergency contact other than parents (Must be 16years or over)

Contact one				
Title				
First name				
Surname				
Relationship to t	he child			
Address				
Postcode				
Tel number			Mobile	9
Responsibilities (Tick all that app		Collect child	from nur	ursery Contact in emergency
Contact two				
Title				

First name				
Surname				
Relationship to t	he child			
Address				
Postcode				
Tel number		Mobile	•	
Responsibilities (Tick all that app		Collect child from nu	rsery Contact in emergency	

Medical details

Does your child have any allergies?						
If yes, please give details of the cause and reaction. We also need to have a copy of any medical records.						
Does your child have any special dietary requirements?						
If yes, please give details:						
	Immunisation	Age Due	Date			
	DTaP/IPV/Hib and PCV	8weeks				
	DTap/IPV/Hib and Men C	12weeks				
Has your child had any of the following immunisations?	DTaP/IPV/Hib, Men C &PCV	16weeks				
	Hib/Men C, MMR(1st) & PCV	Between 12 & 13months				
	DTaP/IPV or dTaP/IPV	3years, 4months				
	MMR(2nd)	3years, 4months				
Name of GP						
Name of surgery						
Address						
Postcode						
Telephone number						
Health visitor details						
Name						

h your child		
Any other details that we should know about?		

What special support will he/she require in our setting?

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is in our setting?

General Parental Permissions

	Emergency treatment declaration
be made to understand r manager for	of an accident or emergency involving my child I, understand that every effort will contact me immediately. Emergency services will be called as necessary and I ny child may be taken to hospital accompany by the setting manager or deputy emergency treatment and that health professionals are responsible for any medical treatment in my absence.
Signature	

Date

<u>Sun cream</u>

I give permissi	on for staff to administer hypoallergenic sun cream (supplied by me) to
my child if nee	ded.
Signature	
Date	

Short trip-General Outings

(Delete as applica	able) I agree / do not agree for my child to take part in general short
trips or outings p	lanned by the setting as part of daily activities. I understand that
individual risk as	sessments are carried out for each type of trip or outing, and
available for me to	o see as required.
Signature	
Date	

Teething gel or Teething granules (children under 2 years)

o 1	child when necessary-in	granules supplied by me to be accordance with manufacturer's
Signature		
Date		

Sharing child's information

(Delete as applica	ble) I agree / do not agree for Little Leaf Nursery to share	
information regardin	g my child with other professionals, e.g. Health Visitor or Speech	
therapist, in regards	to their development. I understand that my views will be taken	
into consideration before any referrals are made.		
Signature		
Date		

1) Photographs

(Delete as applicable) I agree / do not agree for my child's photograph to be used in-		
house only, e.g.	photo observations for child's folder, displays within the nursery.	
Signature		
Date		

2) Photographs

(Delete as applica	able) I agree / do not agree for my child's photography to be used in	
nursery publicity material, including on the internet (children's names will NOT be		
used on any web	site or in any publicity)	
Signature		
Date		

(Delete as ap	plicable) I agree / do not agree for nursery staff to apply plaster on my
child if neede	d.
Signature	
Date	

Key-persons- Information for parents

Each child joining the setting will have a key-person appointed to them. It will be the key person's responsibility to ensure that your child receives the best possible attention whilst in our care and ensure that their records are kept up-to-date. You child's key-person is your first point of contact for anything you wish to discuss about your child. You will be introduced to your child's key person during their settling in sessions.

Policies and Procedures

All policies and procedures can be found at the nursery reception area in the Operational plan folder and other information, which you can access at all times.

Communication Plan

Please tick method of communications regarding sharing information about your child both from nursery to home and home to nursery. Please tick all that apply with your preferred method at the bottom:

Face to face
/ia paper documentation, e.g. daily diary, observation sheets
The preferred method is

Ethnic origin (Tick if applicable)	
White	
British	
Irish	
Scottish	
Welsh	
Mixed	
White and black Caribbean	
White and black African	
White and Asian	
Asian or Asian British	
Indian	
Pakistani	
Bangladeshi	
White and Chinese	
Hong Kong Chinese	
White European	
White Eastern European	
White Western European	
Italian	
Turkish	
Turkish Cypriot	
Kurdish	
Sri Lankan Tamil	
Somali	
Greek/Greek Cypriot	
Portuguese	
Japanese	
Korean	
Philipino	
Iranian	
Lebanese	
Croatian	
Nigerian	
Ghanaian	
Other please specify:	

Terms and Conditions

Agreement for payment of fees		
Child's name		
Person responsible for payment of fee	S	
Name		
Address		
	postcode	
Telephone: Day		
Evening		
Mobile		
I hereby agree to pay the fees for the a	above child on the d	ate they fall due
Signed	Date	
Preferred payment method (circle):		
Standing Order	Cheque	Other - specify
Childcare vouchers	Cash	

PART B – TERMS AND CONDITIONS

1) **REGISTRATION**

All Registration forms must be completed & returned before a child can be admitted into Little Leaf Nurseries, along with other forms. Part time sessions must fit into normal session times, e.g. 7.30am – 12.45pm or 12.45pm – 6.00pm.

£50.00 registration non-refundable and £60.00 deposit is required to secure a place for your child.

2) CLOSURES

Little Leaf Nurseries will close on ALL statutory holidays as well as the maximum of one staff training day per year. Normal charges will apply for these days.

3) FAMILY DISCOUNTS

Where two or more children from one family attend the nursery for two days or more per week, the oldest child will be eligible for a 10% discount in their monthly fees.

4) FEES

Prior to the start date, you shall arrange for the payment of deposit & registration fee. The first month's fees are due prior to the start date, are then payable monthly, in advance, and must be clear by the 28th of each month. For example January fees needs to be paid by the 28th of December. Little Leaf Nurseries shall not be liable to admit your child upon failure by you to pay the deposit and/or fees by the start date or on any

subsequent payment date and this may result in termination of the child's place. All absences (sickness and holidays) are charged at the normal rate.

Standard session will be charged at a fixed monthly rate based on the regular attendance of the child, i.e. weekly session x 51 weeks / 12 =monthly fee.

If your child receives Nursery Education Funding as well as additional hours, please note that monthly fees may vary.

5) LATE COLLECTION

Please ensure you arrive at least ten minutes before your child's session finishes. Parents are required to inform the manager if they are going to be late collecting their child. If children are not collected by the finish time of the session, it will be necessary to make an extra charge of £10.00 per 15 minutes or part thereof. This is payable at the time and is at the discretion of the nursery manager.

6) TERMINATION / CANCELLATION / CHANGE

Should you cancel the nursery place before the child starts a month's written notice is required. A month's written notice is also required to terminate the place or change sessions. This must be addressed to the nursery manager. On giving a month's notice, the deposit shall be refunded in the last month's fees. Failure to give a month's notice will result in a forfeit of the deposit and one month's fee is payable.

7) LIABILITY

Little Leaf Nurseries accepts no responsibility for any loss suffered by you arising directly or indirectly as a result of the nursery being temporarily closed or the non-admittance of the child to the nursery for any reason. Little Leaf Nurseries accepts no responsibility for your child whilst in your care on the nursery premises, e.g. at arrival and pick up times.

8) PROPERTY & BELONGINGS

Little Leaf Nurseries cannot be held responsible for any loss or damage to children's property. Every reasonable effort will be made to ensure children's belongings are not lost or damaged. Please do ensure all your child's belongings have their name on it.

9) ACCIDENT / ILLNESS

Little Leaf Nurseries reserves the right to administer basic first aid treatment when necessary. Parents will be informed of all accidents and are required to sign their child's accident form. For serious accidents requiring hospital treatment, every effort will be made to contact the parent but failing this Little Leaf Nurseries is hereby authorised to act on behalf of the parents and authorise necessary treatment. Little Leaf Nurseries will only administer medication if a medicine consent form has been completed and the medicine has been prescribed by a GP. Little Leaf Nurseries may require you to take your child home from the nursery in the event that a child requires special medical attention or if it is considered the child is not well enough to attend. You may also be required to keep your child away from nursery if she/he is suffering from a contagious disease. Little Leaf Nurseries has a realistic attitude towards working parents but we reserve the right to contact parents if a child becomes ill during nursery hours. We also require that parents inform the nursery if the child contracts any ailments or illnesses.

10) BEHAVIOUR MANAGEMENT

Little Leaf Nurseries may require you to withdraw your child from the nursery in the event that the nursery manager considers the child to be displaying disruptive or inappropriate behaviour.

11) SECURITY

Under no circumstances will any child be allowed to leave the nursery with anyone unknown to the nursery staff unless previously arranged with the manager. If parents make arrangements by phone, the nursery will require the name and a brief description of the person and including the password on their arrival.

12). INFORMATION

Parents are requested to keep Little Leaf Nurseries up to date of any changes to information kept at the nursery, e.g. address, contact numbers, marital status etc.

13) POLICIES AND PROCEDURES

Little Leaf Nurseries policies and procedures are available for parents to read along with our health and safety manual at the nursery reception area.

14) STATEMENT OF INTENT FOR EQUAL OPPORTUNITIES

Little Leaf Nurseries takes great care to treat each individual as a person in their own right, with equal rights and responsibilities to any other individual, whether they be an adult or child. Discrimination on the grounds of sex, race, religion, colour, ability, marital status, ethnic or national origin, or political belief, has no place within this nursery.

15) HOLIDAYS

No discount applies to holiday for only a week. Any holidays over a week, only the 2nd week & 3rd week will be half price. This calculation is done based on the daily rate. This condition does not apply to a child that attends funded hours only.

16) TOYS FROM HOME

For Health and Safety reasons can we ensure that we do not bring toys from home.

17) FOOD

Food of any kind is not allowed in the nursery from home due to allergies.

Please note Little Leaf Nurseries reserves the right to update or amend these terms & conditions at any time.

I have read, understood and accept the above terms & conditions.

Signed.....

Print Name...... Date......