



# Registration Form

We need some details about your child and family. We have a legal obligation to collect and process this information in accordance with The Early Years Foundation Stage (Welfare Requirements) Regulations 2012 and therefore we do not require your consent for the first section of this form. Where information to be supplied is voluntary or where we do need consent this is identified. The information provided will be kept in paper form and used for the purpose of maintaining appropriate contact details and for the safety and well-being of your child.

**Please complete this form and return it with the registration fee (£20) this form must be completed by someone who has parental responsibility.**

## Childcare requirements

Required start date:.....	Please mark below the days you require:				
Am session (9-12)	Monday	Tuesday	Wednesday	Thursday	Friday
Pm session (12-3pm)	Monday	Tuesday	Wednesday	Thursday	Friday
All day (9am-3pm)	Monday	Tuesday	Wednesday	Thursday	Friday

## Other information

How did you first hear about Holme Village Pre-school? Please tick appropriate box(es)		
Magazine	Recommendation	Facebook
Leaflet	Website	Other (please specify)
Did you look at any other nurseries or Pre-school?	Why did you choose Holme Village Preschool?	

## Basic Details

Child's name:	Known as:	Registered Charity 800560
Date of birth:	Gender:	
Name of parent(s) with whom the child lives:		
Parent	Parent	
Do you have parental responsibility for this child? <b>Yes/No</b> (please delete as appropriate)	Do you have parental responsibility for this child? <b>Yes/No</b> (please delete as appropriate)	
If no, do you have legal contact? <b>Yes/No</b> (please delete as appropriate)	If no, do you have legal contact? <b>Yes/No</b> (please delete as appropriate)	
Address of parent(s) with whom the child lives:		
Home telephone number:	Mobile telephone numbers:	
Parent:	Parent:	
Parent:	Parent:	
Email address		
Would you prefer to receive invoices, newsletters, tapestry and information via email?		
<b>Yes/No</b> (please delete as appropriate)		
If YES please sign here to consent to us contacting you for the purposes above .....		

Name of parent(s) with whom the child <b>does not</b> live:		
Does this parent have parental responsibility?	<b>Yes/No</b>	(please delete as appropriate)
Does this parent have legal contact?	<b>Yes/No</b>	(please delete as appropriate)
Does this parent have legal access to the child?	<b>Yes/No</b>	(please delete as appropriate)



Address:

Home Telephone No.

Mobile Telephone No.

Registered Charity

**Emergency Contact Details**

*Please provide the names and contact details of 2 people (other than parents/guardians) who we can contact in case of an emergency.*

**NOTE: It is your responsibility to ensure these people are happy for us to contact them and to hold their details.**

Emergency Contact 1

Emergency Contact 2

Name

Name

Home telephone no

Home telephone no

Mobile telephone no

Mobile telephone no

Relationship to child

Relationship to child

**Security Details**

A password system operates in our setting. A secure password is required and should be used by emergency contacts and persons authorised to collect your child. Ideally this should be one word and something that is easily memorable. Please do not use obvious things such as middle names. The password is required from anyone collecting your child. If they do not have the password, we will not release your child to them.

My secure password is

Persons authorised to collect the child. This is any other adult who may collect your child in your absence. Authorised persons must be over 18 years of age.

**Authorised Person 1**

**Authorised Person 2**

Name

Name

Home telephone no

Home telephone no

Mobile telephone no

Mobile telephone no

Relationship to child

Relationship to child

**Additional Security Information**

We have the safety and well-being of the children in mind at all times and we are sure that you will appreciate that persons known to you are strangers to us and we do need means of identifying those you have authorised to collect your child (either authorised or emergency contacts) when you are unable to.

We as a setting and especially your child/children key person will be familiar with you but we do not always have the opportunity to meet both parents. This is also true of your nominated emergency contacts and authorised persons. We therefore request that should anyone unknown to us be collecting your child that you inform us in advance and show us a photograph to enable us to identify them when they collect your child.



## Health Information

Does your child suffer from any of the following *(please tick those which apply)*

Asthma		Epilepsy	
Heart Condition		Kidney/Bladder problems	
Diabetes		Bee Sting Allergy	
Sight Impairment		Deafness	
Wears Glasses		Other	

If you have ticked any of the boxes above, please give details here:

Does your child require medication, either long term for existing conditions or life saving drugs such as Ventolin? *(Please give details of the medication and dosage)*

Does your child have any special dietary needs or preferences? **Yes/No** *(Please delete as applicable)*  
 If yes please give details below

Does your child have known allergies? **Yes/No** *(Please delete as applicable)*  
 If yes please give details below

Name of GP:  
 Surgery:  
 Address:  
 Telephone number:

## Safeguarding Children

Does your family have a social worker for any reason?



Name

Telephone number

Pre-school

Based at

Registered Charity  
800560

What is the reason for the involvement of Social Services with your family? (please continue on back if needed)

**FOR OFFICE USE** - NB If the child has a child protection plan, make a note here, but do not include details. Ensure these are obtained from the social worker named above and keep these securely in the child's named Child Protection file.

The following information is voluntary and you do not have to complete it. However, we have a legitimate interest in requesting this data as it will assist in providing the necessary care for your child and to allow us to monitor and assess their development.

## Health Visitor

Name

Telephone number

Based at

Has your child had their two-year-old progress check?  
*(applicable)*

**Yes/No** *(Please delete as applicable)*

If so, on what date was this completed?

Are you able to share this information with the setting?  
*(applicable)*

**Yes/No** *(Please delete as applicable)*

The following section requires information classed as 'sensitive personal data' for which we need your consent to collect and process. We request this data as, in some cases we have a contractual obligation to do so with our Local Authority, but also as we have a legitimate interest to allow us to plan and meet your child's needs.

## Ethnicity and Cultural background

How would you describe your child's ethnicity/cultural background?

What is the main religion of your family?

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 s/he is in our setting?

What is/are the main language(s) spoken at home?

If English is an additional language, will this be your child's first experience of being in an English-speaking environment?

**Yes/No** *(Please delete as applicable)*

## Special Educational Needs and Disabilities

Does your child have any special needs or disabilities?  
(applicable)

Yes/No (Please delete as

If yes please give details below



What (if any) special support will your child require in our setting? i.e. with speech, or moving, communication?  
Registered Charity 800560

## Professionals involved with the child

Name	Name
Agency	Agency
Role	Role
Telephone no	Telephone no

The following section contains information for which we need your consent. As required by data protection we have a duty to inform you that you can withdraw your consent for any of the permissions detailed below at any time. Should you wish to withdraw consent please discuss this with a member of staff in the first instance.

## Permissions and Consent

### Permission for the setting to act in loco parentis

If emergency treatment is required, either whilst your child is on the premises or on an outing, (for the duration of your child's time with us) and the parents or legal guardians cannot be reached immediately, your signature in the space provided below empowers the settings management to exercise their own judgement in calling the doctor/dentist indicated above or to transport the child to a hospital casualty department by ambulance. Please read and fill in the declaration below, cross out the statement/wording that does not apply, and sign and date this section.

I / We parent(s)/guardian(s) of \_\_\_\_\_ do / do not give consent on my / our behalf for an anaesthetic to be administered or for any other urgent medical treatment to be given.

I / We do not agree to this statement and indicate our wishes as follows

Signatures of parent(s)

Date

### Permission for the application of sun cream

Please read the statements below and strike through the statement that **does not** apply

I / We parent(s)/guardian(s) of \_\_\_\_\_ give consent on my behalf to apply Pre-school's own supply of high factor children's sun cream to my child.

**OR**

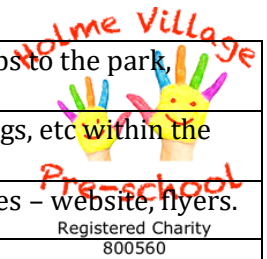
I / We parent(s)/guardian(s) of \_\_\_\_\_ do not agree to the above statement and I / We will supply our own sun cream, clearly labelled with my child (rens) name.

Signatures of parent (s)

Date:

Please tick the statements below if you consent to the following:

	I consent to my child participating in off-site outings as part of daily practice e.g. trips to the park, shops, etc
	I consent to my child having their photograph taken for use in displays, for name pegs, etc within the setting (as this is a building that can be rented by the public)
	I consent to my child having their photograph taken to be used for publicity purposes – website, flyers.
	I consent to my child’s photograph being used on the setting’s social media sites
	I consent to my child’s artwork (with their name) being displayed in the setting
	I consent to my child’s photograph being used in learning journeys of other children within the setting
	I consent to my child being videoed for use by the setting staff only with regards to observational purposes either assessment of children, an activity or for monitoring children’s behaviour
	I consent to the video, as mentioned above, to be shared with other professionals visiting the group such as Early Years Advisors, SENCO, Health Visitor etc if necessary
	I consent to my child’s learning journey being shared with Ofsted inspectors and/or as part of audits by the local authority
Please sign below to confirm your consent for the indicated statements above:	
Signature of Parent(s)/Guardian:	



Further information regarding how we use children’s images within the setting can be found in our Image Use Policy.

<p><b>SPECIAL NOTE:</b> Please notify us immediately of any changes to the information provided. Please feel free to come and discuss any problems or concerns with us. If there are any other notes you would like to add, please use the space below.</p>	
<p>I / We confirm that the information provided on this form is correct to the best of our knowledge.</p>	
Signature of Parent /Carer	Signature of Parent /Carer
Date	Date

**Thank you for completing this form. You are welcome to request to see the information we hold on you and your child at any time.**

<p><b>Office Use ONLY</b></p> <p>Registration received: YES/NO</p> <p>Date received:</p> <p>Confirmation sent: YES/NO</p> <p>Date Sent:</p> <p>Birth Certificate seen: YES/NO</p> <p>Checked by:</p> <p>Date seen:</p> <p>Settling sessions organised:</p>
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# Holme Village Pre-school Terms and Conditions

## Admission

A completed Childcare Agreement Form and Registration fee.

## Registration Fee

The registration fee of £20 covers administration and settling sessions.

## Fees and Invoices

Childcare accounts are payable monthly or termly, in advance for a calendar month of childcare. Accounts are payable by standing order, card or cheque made payable to "Holme Village Pre-school". We also accept childcare vouchers. We can apply on your behalf for the Free Entitlement from your local LEA (more information will be given to you when your child becomes eligible). Invoices will be due for payment on the 10<sup>th</sup> of the month. Cheque payment will not be accepted after 10<sup>th</sup> of the month, credit/debit card payment will be required. Any parent or carer whose fees remain unpaid after 15<sup>th</sup> of the month, without prior agreement of the Pre-school Manager, risks their child's place at the nursery being withdrawn. Any payments that are cancelled or returned from the bank will incur a £25 administration charge, and the parent/carers will be asked to pay by credit/debit card in future.

Unless we are in breach of these terms and conditions all booked sessions must be paid for regardless of child's attendance. No refunds are given for sessions missed due to sickness or holidays or unavoidable nursery closure. Be aware that the number of days childcare provided each month may vary. Bank holidays and staff training days will not be charged for.

If you expect to be late collecting your child please notify the Pre-school as soon as possible. If notified, the additional time will be charged at the standard hourly rate. Un-notified late collection will be charged at a rate of £5 per 5 minutes hour to cover emergency staffing and other arrangements.

In case of default on payment the Pre-school reserves the right to apply a £50 administration fee for preparation of court papers and interest will be charged at 8% above the bank's prevailing base rate.

The Pre-school is not responsible for collection of fees from any third parties except in the case of statutory nursery education funding allowance. The Pre-school will give parents and carers two months' notice of increase of fees which will normally be reviewed in September.

## Opening times

The Pre-school sessions run from 09:00 to 15:00. The Pre-school is term time, which runs inline where possible with Holme Village Primary School.

## Termination, cancellation and change of sessions

One month notice is required by either party for any change of sessions or termination of agreement. If parents choose to leave prior to the end of their notice, fees are non-refundable. The minimum period for any permanent change of sessions is one month. If the notified start date is changed by the parent, we reserve the right to charge from the original start date notified on the Agreement form. The Pre-school reserves the right to terminate the Agreement with immediate effect in case of non-payment of fees, or if a parent, carer or child displays abusive,

threatening or otherwise inappropriate behaviour, or for any other reasonable cause.

Intimidation or abuse of our staff will not be tolerated and may result in immediate termination. In all other cases the standard notice period of one month will apply.

## Insurance

The Pre-school has extensive insurance cover for Pre-school based activities and outings. Details of the insurance may be requested from the Pre-school manager. The Certificate is displayed in the Pre-school.

## Personal property and belongings

The Pre-school cannot be held responsible for any loss or damage to any parent's, carer's or child's property or belongings. Every reasonable effort will be made by the preschool staff to ensure that property or belongings of any parent, carer or child are not damaged. Please ensure your child's clothing is clearly labelled and we suggest that all toys, books and equipment are left at home.

## Liability

The Pre-school accepts no liability for any losses suffered by parents arising directly or indirectly, as a result of the nursery being temporarily closed or the non-admittance of your child to the nursery for any reason. We accept no responsibility for children whilst in their parent's care on nursery premises. We will not be liable to parents and/or children for any economic loss of any kind, for damage to the child's or parent's property, for any loss resulting from a claim made by any third party or for any special, indirect or consequential loss or damage of any kind

## Accidents and illness

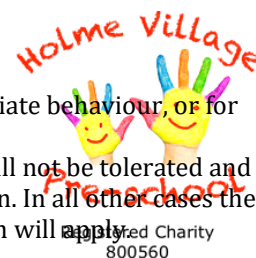
The Pre-school reserves the right to administer first aid and any emergency treatment as required. Parents will be informed of all accidents and will be asked to sign an Accident record form. If emergency treatment at hospital is required the Pre-school will make all reasonable attempts to contact the parents but if this is not possible we are authorised to act on behalf of the parents and authorise any necessary emergency treatment.

We will administer **prescribed** medicines only if parents have completed a Medicine Consent form.

## Agreement

We may require parents to withdraw their child from Pre-school in the event that they require special medical care or attention which is not available or refused by the parent, or it is considered that the child is not well enough to attend Pre-school. We may also ask parents to withdraw their child from the Pre-school if we have reasonable cause to believe that the child is suffering from or has suffered from any communicable disease or infection and there remains a danger that other children may contract such a disease or infection. Please refer to our Health Illness and Emergency Policy regarding exclusion and incubation periods by which we are bound. Parents must inform the Pre-school if the child is suffering from any illness, sickness or allergies before attending the Pre-school.

The Pre-school is mindful of the needs of working parents and will endeavour to provide as much continuity of service as possible within the recommendations of the Health Protection Agency by which the Pre-school is bound.





These Terms and Conditions represent the entire agreement and understanding between the parents (including other carers) and the Pre-school. Any other understandings, agreements, warranties, conditions, terms and representations, whether verbal or written, expressed or implied are excluded to the fullest extent permitted by law. We reserve the right to update / amend these Terms and Conditions at anytime. One month notice will be given of any changes made.



I have read and understand these Terms and Conditions and agree to be bound by them.

Signed (parent) .....Signed (parent).....

Print name: .....Print name:.....

Date: ..... Date:.....

## Holme Village Pre-school's Fees

Here at Holme Village Pre-school we are committed to providing a fair and open admissions system that offers a competitively priced and good value service. We understand that these fees may seem expensive to a parent/carer. However providing a high quality, safe and stimulating service for children to grow and learn in, is not cheap to ensure the high standards and sustainability of the Pre-school.

The fees are as follows:	2 years	3 and 4 years
Morning Session (9-12)	£17.00	£16
Afternoon Session (12-3)	£17.00	£16
Full Pre-school Day (9am-3pm)	£34.00	£32

The payment of fees should be made monthly or termly. There is a consumable fee of £1/funded hour accessed, this covers the cost of providing resources. Any individual payment arrangements will be negotiated between the managers and the parent/carer, these payments should always be in advance and not in arrears.

If fees are not paid on time then the Manager will send an invoice home requesting payment as soon as possible. There is a £1/day fee for late payments after the 10<sup>th</sup> of the month. The manager has the right to issue a formal warning to the parents/carer to inform them that continued late payment will result in their child's place being forfeited.

If fees are paid constantly late or not at all with no explanation then Holme Village Pre-school will be forced to terminate that child's place.

Please carefully read the conditions below and sign at the bottom.

- *I agree to the pay the fees shown above (subject to any annual increase) in advance of any session that my child attends. I understand that if I do not pay fees then my child's place at Holme Pre-school will be forfeited.*
- *There is a one –off fee of £20.00 per child to secure a place & this is payable at the time of registration either by cash or cheque. This is a non-refundable admission fee.*
- *I understand that fees are payable for every session booked, including sickness, regardless of whether my child attends or not. If I wish to cancel or reduce the hours of my child's place, I will give one calendar months notice in writing; otherwise I understand that I will be charged.*
- *No fees are charged when the setting is closed (school holidays or bank holidays)*

**I have read and understood & accept all the above statements and charges and agree to pay them**

**Signed .....** Parent/Guardian                          **Date.....**

**Signed .....** Parent/Guardian                          **Date.....**

## **Tapestry Registration and Consent**

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

I have read the information about the Tapestry system and understand that by signing this consent form I will receive an email message and will be able to log in and see observations of my child. These observations may include photographs, video clips or audio recordings.

I hereby give consent for my child to be photographed/videoed for record- keeping purposes and for the use of Early Years Professionals at Holme Village Pre-school.

I understand that there may be group photographs/videos that incorporate images of my child and other children and teachers. I agree that these photographs/videos may be used in other children's learning journeys. To protect and respect privacy, I agree not to use/upload/share the photographs, videos and audio recordings involving other children on public web-sites such as social media websites and may not utilise information from my child's learning journey for purposes other than understanding the development of my child.

The policy on photographs/videos covers this in more detail which I can access in the Policies Folder located outside the office.

I agree that my child's observations, learning journey, reports and other documents created through Tapestry can be stored on Tapestry's systems. I agree to log in using only the personal log-in provided to me. The following email address(es) can be used to send me notifications through the Tapestry system.

<b>Your Name</b>	<b>Your e-mail ID</b>	<b>Relationship to the child</b>	<b>Your Signature</b>