

Little Sunbeams Pre-school

Pre-School use only
Date of birth checked
Residence checked
Start date

REGISTRATION FORM

All information is strictly confidential

In order to claim government funding for your child, proof of the child's date of birth (Birth certificate, passport or Child benefit book) will be required when registering at the pre-school. We may need to verify the child's usual place of residence.

CHILD CONTACT DETAILS

Child's Full Name:		Date of Birth
Address		
Childs religion		
First Parent/Guardian	Second Parent/Guardian	
Name	Name	
Address if different to child's)	Address if different to child's)	
Occupation	Occupation	
First Language	First Language	
Home Tel	Home Tel	
Mobile No	Mobile No	
Work Tel	Work Tel	
Email address	Email address	

ADDITIONAL EMERGENCY CONTACT NUMBERS

Name:	Tel: No
Relationship:	Mobile No:
Name:	Tel No:
Relationship	Mobile No:

**ADDITIONAL PERSON AUTHORISED TO COLLECT CHILD (OTHER THAN THE ABOVE)
(MUST BE OVER 16 YEARS OF AGE)**

Name:	Tel No
Relationship:	Mobile No

SECURITY

All children are collected by a person named by you when your child is signed in the book in the morning. Is there any person who is not permitted access to your child because of a Court Injunction for example?

ABOUT YOUR CHILD

Language/s spoken at home:

Starting Points Form; Please fill in the attached Starting Points form so we can begin to plan for your child.

Has your child had a 2 year old check with a Health Visitor – Yes / No.
Can we please see the Ages and Stages Questionnaire from your Childs Health Record Book (Red Book) - Yes / No

Is there any aspect of your religion, family traditions or celebrations that you feel we should know in order to include it in our curriculum planning. Are there any religious festivals or celebration days you do not wish your child to participate in:

Does your child attend any other pre-school or nursery/ childminder? Yes/ No
This information allows us to plan extra sessions for your child and liaise with the other nursery/childminder prior to starting

If yes which one?	If yes which days?
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Is there any other relevant information about your child that the pre-school should be aware of? I.e. recent or impending house move, new baby in the home or other brothers and sisters

OUTSIDE AGENCIES – Please delete where applicable		
Does your child have a special educational need? Yes/No		
Does your child have a statement? Yes /No		
If you have answered yes to any of the above please give a brief summary		
Is your child, or has your child been subject to a Child Protection (CP) Plan or a Child In Need (CIN) Plan? Yes/ No		
Do you have a named Social Worker?		
Name :	Telephone Number:	
HEALTH		
Doctors Name	Tel No:	
Address		
Do you have a Health Visitor Yes/No		
If yes Name:	Based at	
Vaccinations/Immunisations (Please tick those that your child has received)		
Diphtheria	Measles	Polio
Rubella	Mumps	Whooping Cough
Tetanus	MMR	
Does your child have any special dietary needs, allergies or ongoing health problems/treatments that the pre-school should be aware of		
Please give details of professionals involved with your child (i.e. Dieticians, Pediatricians, Speech and Language therapists etc)		
Name	Role	
Agency	Tel No	

TAPESTRY

Little Sunbeams uses Tapestry software to record your child's learning journey with us.

Tapestry works as a 'cloud' storing information electronically which staff can update instantly and parents can access directly from your home/work PC or smart phone.

The electronic data is stored securely within Hampshire and the software can only be purchased by registered Early Years providers who have a subscription to the Early Years Foundation Stage Forum.

Your unique email address and password allows you to view your child's learning, photographs/videos and allows you to add comments and respond to what other members of staff have said about your child's achievements.

In order for us to utilize the feature and share information with you we need to load up to 2 email addresses for each child. These emails could be for mum, dad, grandparents. childminder etc.

Once we have received and loaded your email address for your child's Tapestry we will provide you with all the log on information and details of how you can use this feature

First logon

Full Name

Email Address

Do you live at the same address as the child **YES/NO**

If no, please provide your address

Second logon

Full Name

Email Address

Do you live at the same address as the child **YES/NO**

If no, please provide your address

CONSENTS – PLEASE DELETE WHERE APPLICABLE

First Aid: I will /will not allow my child to receive basic first aid from staff.

Medical Treatment: I will/will not permit medical treatment to be given to my child in an emergency and I cannot be contacted. I understand this may include hospital treatment recommended by a doctor or dentist.

Nappy Rash Spray: I will/ will not give permission for the pre-school to apply the Nappy Rash Spray provided by the pre-school.

Sun Creams: I will /will not give permission for the sun cream provided by the pre-school to be applied to my child or I will/ will not provide my own cream/spray for my child which I give permission for you to apply.

Evacuation: I will/will not allow my child to be taken outside the pre-school premises for a fire drill. Fire drills are practiced once every half term. In order to do this we have to take the children out of the building. In the event of a real evacuation/emergency **ALL** children will be taken to: St John the Baptist Primary School, Abshot Road, Titchfield Common, Fareham, PO14 4NH. From where you will be contacted by a member of staff to arrange the safe collection of your child.

Outings: I will /will not allow my child to be taken off the premises for short educational walks and/or visits to the local school/shops etc.

Photographs/Videos: I will / will not give permission for my child to be photographed/Videoed
We regularly take photographs/Videos of the children during their time with us. These photographs are used to record your child's achievements, development and for display purposes only.

Website: I will / will not give permission for photographs of my child to be used of the Little Sunbeams Preschool website (Please note NO child appearing in a photograph will be identified by name).

SENco: I will / will not give permission for the preschool Special Educational Needs coordinator to contact outside agencies (Health visitor, speech and language therapist etc if they feel it is necessary to help the development of my child.

Safeguarding: Please Note : In the event of a safeguarding issue, parental permission to contact outside agencies may or may not be sought depending on the circumstances

Information Sharing: I will/will not give permission for Little Sunbeams to share information regarding my child's development with another setting that they also attend

Tapestry: I give my permission for my child to be observed and their progress tracked using Tapestry. I do/ do not give consent for my child's image to be included in group observations.

2 Year old Check : I will/will not give consent for my child's 2 year developmental check to be shared with other professionals to ensure they receive the correct support

Childs Name

Signature

Date

COMMUNICATION

What is your preferred method of contact for newsletters and general notifications? Please tick one.

E Mail Paper

FEES

Please note fees are payable within two weeks of receiving the invoice when paying half termly and on the first session of the week when paying weekly. At time of printing (April 2016) fees are £4.50 per hour.

EQUALITY AND DIVERSITY

This data is collected on a voluntary basis

A child's ethnicity will only be recorded where the parent/guardians have identified it themselves.

Our pre-school is committed to providing equality of opportunity and anti-discriminatory practice for all children and families, and to meet the needs of the children.

Please tick as appropriate

White-British, Irish, Traveller of Irish heritage, Gypsy/Roma, any other white background	
Mixed – White and Black Caribbean, White and Black African, White and Asian. Any other mixed white background	
Asian or Asian British, Indian, Pakistani, Bangladeshi, Any other Asian Background.	
Black or Black British, Caribbean, African, Any other Black background	
Chinese	
Any other ethnic background	

AGREEMENT

I have read the above registration form and agree to abide by its conditions

Signed	Date

Name

(Parent/guardian)