



ARKLEY'S LITTLE ACORNS NURSERY

REGISTRATION FORM PLEASE FILL OUT IN CAPITAL LETTERS

This is the first part of the registration for your child. When this has been returned then you will be given the full registration pack along with a 'Starting nursery' Booklet. If you would like a placement at our nursery then this form needs to be returned as soon as possible as to save a place for your child. We cannot guarantee a place until this is returned.

| | MOTHERS DETAILS | FATHERS DETAILS | | CHILDS DETAILS |
|--------------------|----------------------------|----------------------------|--|---------------------------|
| Title & First-name | | | First-name & Surname | |
| Surname | | | Known As | |
| | | | Date of Birth | |
| Address | | (If Different) | Boy or Girl | |
| Postcode | | | Doctors name: Tel No: Address: | |
| Email Address | | | Any Special Educational Needs or disabilities? | |
| Home Tel No. | | | | |
| Mobile No. | | | | |
| Work No. | | | Allergies | |
| Occupation | | | Languages Spoken & Ethnic Background code | |



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| | MOTHERS DETAILS | FATHERS DETAILS | | CHILDS DETAILS |
|---------------------------------|---|----------------------------|---|-----------------------|
| Nationality | | | Nationality | |
| Religion | | | Religion | |
| Extra Emergency contacts | Name, Tel No & Relationship to Child | | Any siblings at Arkley's Nursery? | |
| 1 st Contact | | | Proposed Date of Admission & Sessions? | |
| 2 nd Contact | | | | |
| Who has parental responsibility | | | Office Use Only: | |
| Parent's Signature | | | £50.00 Registration Fee Paid <input type="checkbox"/> | |
| Date | | | Form of Payment: Cash <input type="checkbox"/> cheque <input type="checkbox"/> Number _____ Date Paid: ____/____/____ | |

Please return the form with a refundable Deposit of £100 and a non-refundable registration fee of £50.

Thank you



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Authorized people to collect child

Names of any other persons authorized to collect your child from nursery: _____

Relationship to child: _____

You will need to give them a password that they will need to be able to pick your child.

Please choose a password: _____

You need to inform a member of staff if this person will be picking your child.

Parents Signature: _____ Date _____

To complete the registration, we will need:

Child's birth certificate

One household bill

Childs red medical book

Name & address of Health Visitor.....

.....

On completion of the registration you will be given an invoice for your child's sessions. Fee's need to be paid before your child starts nursery.

We look forward to working in partnership with you to help your child reach their full potential.

Arkley's Little Acorns Nursery

For office use only:

Child's birth certificate _____

Signed by manager _____

Household bill _____

Signed by Deputy _____

Immunizations up to date?: _____



ARKLEY'S LITTLE ACORNS NURSERY

Parental Consent Form

Full name of child: _____

1. I give permission for my child to go on outings with the teachers from The Arkley's Little Acorns, by foot to places of interest. You will be informed of any visits that will take place.

Parent/Guardian Signature: _____

2. I give permission for my child, in the event of an accident or illness, to be seen by a doctor and/or taken to hospital. I understand that every effort will be made to contact me beforehand, but if I cannot be contacted in an emergency, medical treatment will be administered in my absence.

Parent/Guardian Signature: _____

3. I give permission for photographs to be taken of my child and understand that these photographs may be used for display within the nursery and in the children's individual portfolios.

parent/Guardian Signature: _____

4. I give permission for staff to apply sun lotion on my child. The Parent should supply the sun cream for their child. If no sun cream is supplied staff will use the spare nursery one until parent supplies it.

Parent/Guardian Signature: _____

5. I give consent to Arkley's Little Acorns Nursery School to share information about my child with relevant professionals, for example health and education professionals.

Parent/Guardian Signature: _____



ARKLEY'S LITTLE ACORNS NURSERY

COOKERY

Dear Parents,

Within our planning, we will be teaching / preparing some simple cooking activities. We would appreciate if you could let us know if there are any foods your child is allergic to or you do not want your child to eat due to religious or cultural reasons.

Name of child:

Foods to avoid:

Allergies:
.....

What reaction does your child have towards these allergies?
.....
.....
.....

Parents signature..... Date.....

For office use only:

Child added to Allergy list?.....

Child added to Foods to avoid list?.....

Manager's signature..... Date.....



ARKLEY'S LITTLE ACORNS NURSERY

Terms and Conditions of a placement for your child

- Application, Registration and fees:

Signed and fully completed registration forms together with a refundable Deposit of £100 and a non-refundable registration fee of £50 is required prior to confirmation of a place.

Sessions will be discussed and any arranged holidays that you have made must be mentioned to the manager.

We require a copy of your child's birth certificate, along with proof of address i.e. a Bill.
(This is a requirement from The London Borough of Barnet)

The nursery accepts all types of childcare vouchers as part payment of fees and we operate the Nursery Educational Grant for all 3 – 5 year olds and we also accept children that have been offered the 2 year funding. If your child is absent due to sickness, holiday or missed sessions, there will be no refund given. This is also applicable for Bank Holidays and if the nursery is closed due to unforeseen circumstances.

Parents are responsible for all outstanding fees. The nursery is not liable for collections from third parties.

If a child is collected after the agreed time, a late fee will apply at the Manager's discretion. This will be £5 charged every 5 minutes.

Fees are renewed annually and any increases will be given at the end of the term, to start at the beginning of the next term.

- **TERMINATION/ CANCELLATION / CHANGE OF SESSION.**

If you decide to terminate your child's place, we require **A TERMS NOTICE** in writing and given to the Manager.

All reserved sessions are non-changeable. If your child is off due to sickness/holiday/appointments we cannot swap for a different day as we need to follow strict child/adult ratios.

Failure to make payment will result in terminating the nursery place for your child and fees will need to be recovered.

The nursery reserves the right to terminate a placement if important information concerning or affecting your child is withheld/not communicated to nursery staff.

In any other circumstance of termination, the nursery will provide half a terms notice.



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PERSONAL PROPERTY

While staff will take all reasonable care to ensure that Children's belongings are not lost or damaged, the nursery cannot be held responsible for any loss or damage that otherwise might occur.

All Items of clothing, wellington boots and lunch boxes must be clearly labelled.

- **LIABILITY**

The nursery cannot expect responsibility for children whilst in the care of their parents/carers on the premises, including the area surrounding the outside of the nursery.

- **ILLNESS**

Parents may be asked to keep their child at home due to illness.

The nursery cannot accept responsibility for children contracting contagious disease or infections.

Parents are obliged to inform the nursery of any sickness, illness or allergies on the registration of their child and thereafter.

Administration of prescribed medication will be given if parental consent has been sought.

- **SECURITY**

Children are not permitted to leave the premises with anyone unknown to nursery staff, parents are asked to provide nursery staff with a list of all individuals who will be dropping of or picking up their child. This information should include full names, Addresses and telephone number. A password will need to be supplied at point of registration.

- **Information Sharing**

We at times may need to share information about your child, this will be done in the strictest confidence and on a need to know basis. This will normally be transition records when your child starts school.

I _____ agree to all the above terms and conditions.

Child's name _____

Parental Signature _____ Date _____



ARKLEY'S LITTLE ACORNS NURSERY

Nursery policies

The school policies can be found on our website at www.arkleynursery.com

A detailed version can be viewed at nursery on request.

Please sign below confirming that you have read, understood and agree with the policies.

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

