



OFSTED REGISTRATION: EY321131 CHARITY NUMBER: 1044713 TEL: 07871 480680

learn to play - play to learn

## Registration contact details:

Child's full name: .....

Name child likes to be called:.....

Date of birth:.....

Parent/Carer 1 Details	Parent/Carer 2 Details
Full Name: .....	Full Name: .....
Address: ..... ..... ..... .....	Address: ..... ..... ..... .....
Home telephone: .....	Home telephone: .....
Mobile telephone: .....	Mobile telephone: .....
Work telephone: .....	Work telephone: .....
Email address: ..... .....	Email address: ..... .....

First emergency contact if unable to contact parent/carer

Name:..... Relationship to child:.....

Home Telephone ..... Work/Mobile: .....

Second emergency contact if unable to contact parent/carer

Name:..... Relationship to child:.....

Home Telephone ..... Work/Mobile: .....

## Registration further information:

Child's first language:.....

Child's second language:.....

Child's nationality:.....

Child's religion (if any):.....

Child's ethnicity:.....

Child's cultural requirements:.....  
.....

Child's dietary requirements:.....  
.....

Does your child have any known allergies?                      Yes    No  
If yes – please specify:.....

Does your child take medication?                                      Yes    No  
If yes – please specify:.....

Was your child's birth premature?                                      Yes    No  
If yes – please specify number of weeks etc.....

Is your child up to date with immunisations?                      Yes    No  
If no – please specify:.....

Has your child had their 2 year check?                                      Yes    No  
If no – please specify:.....

Is your child registered with a dentist?                                      Yes    No  
If no – please specify:.....

Any other information we should know about your child:.....  
.....  
.....  
.....

Name of G.P.....

Address of G.P.....

Telephone of G.P.....

## Registration medical consent details:

I give consent for my child.....(name) to receive **First Aid** should it be needed.

Print..... Signed..... Date.....

I give consent for my child.....(name) to receive **Emergency Medical Treatment** should it be needed.

Print..... Signed..... Date.....

I give consent for my child.....(name) to receive **Hypo-allergenic plasters** should it be needed.

Print..... Signed..... Date.....

## Registration Tapestry consent:

In order to comply with General Data Protection Regulation (GPDR May 2018) we need you to complete the following before you can access your child's online learning journal on Tapestry by ticking the appropriate boxes.

	Yes	No
I consent to photographs of my child being taken by authorised staff representing pre-school.		
I consent to photographs containing my child's image being included in other children's learning journals.		

Please note you have the option to view any photographs before they are included in any learning journal, should you request this in writing.

	Yes	No
I consent to treat photographs containing images of other children as for my own personal use only**		

\*\*This means that the information cannot be shared with others, or published in any way (e.g. on social media or displayed in a public place), without the explicit consent of the parents or carers of those children who may be included.

Print..... Signed..... Date.....

## Registration data consent:

	Yes	No
I consent for photographs to be taken whilst taking part in activities (The photographs may be used to demonstrate to other parents and other organisations what is on offer within our provision)		
I consent for photographs to be put on the Kingsland Pre-School website		
I consent for my child to be included in non-identifiable photographs on the Kingsland Pre-school Facebook page		
I am happy to receive correspondence by email – including invoices, newsletters and updates etc		
I give my consent for sharing information, photos and videos with other agencies, e.g. speech and language, health visitor, local school		

Please note that you can withdraw your consent, in writing, or request to see photographs taken at any time. This form is valid for the duration of your child's time at Pre-School. It is your responsibility to let us know if you want to withdraw or change your consent at any time.

Print..... Signed..... Date.....

### GDPR

We will only use your personal information in relation to our childcare service.

We would like to keep sending you information about our pre-school by email/Facebook; but we need to be sure we have your permission to do so.

We keep your information so you can receive important updates about our Pre-School. We will keep your information secure and will never share it except if required to do so by law.

By ticking this box  you are consenting to us continuing to hold and process your data and sending you information. You can of course unsubscribe/ask us not to contact you by email/phone/Facebook etc. at any time.

I, the undersigned, agree that I have read all relevant pre-school policies. I understand that these policies are in place to ensure the quality of the provision made for all children at Kingsland Pre-School. I agree to respect and abide by all policies. I have received a Welcome Information Pack, which includes the procedure for making a complaint.

Print..... Signed..... Date.....

## Registration attendance details:

Please tick the sessions you wish your child to attend, this is so we can be sure the correct staff ratio on each day.

Once you have booked your child into Pre-School, all hours that you have booked will be charged for half a term, you will be invoiced at the beginning of term. Payment would be appreciated in the first two weeks, otherwise weekly payments can be arranged.

If your child is unable to attend the requested hours, you will still be charged and unfortunately we cannot offer an alternative day as compensation,

Monday	9am-12pm		Lunch 12-1.00pm		12.00pm-3.00pm	
Tuesday	9am-12pm		Lunch 12-1.00pm		12.00pm-3.00pm	
Wednesday	9am-12pm		Lunch 12-1.00 pm		12.00pm-3.00pm	
Friday	9am-12pm		Lunch 12-1.00pm		12.00pm-3.00pm	

Does your child attend another setting/childminder? Yes No

If yes, please name the setting/childminder.....

Is your child claiming funding at the above setting? Yes No

If yes, how many hours funding are you claiming for that setting.....

(There is currently a maximum of 15 hours automatic funding available for every child the term after they reach three years of age. There is extra funded hours which are only available for some children aged three to four – to be able to claim any extra hours at Kingsland Pre-School you will need to register with HMRC (30 hours free childcare), once registered they will issue you with an 11 digit code which needs to be authorised by Herefordshire Council.

HMRC 11 digit code: .....

Kingsland Preschool funded hours:.....

Other setting funded hours:.....

Please provide your child's birth certificate asap to enable funding to be claimed.

This is in accordance with The Statutory Framework for the Early Years Foundation Stage.

If you have any questions or queries about anything covered in this registration pack, please do not hesitate to contact us – we look forward to welcoming you to pre-school soon!