

## 10.4. Registration and Booking Form

Little Herons Pre- School Registration Form  
 Nursery Class, North Curry School, Greenway, North Curry TA3 6NQ  
 01823 490 423 [littleheronspreschool@nc.huish.education](mailto:littleheronspreschool@nc.huish.education)



CHILDS DETAILS		
<b>First Name:</b>	<b>Surname:</b>	<b>Known as:</b>
<b>Date of Birth:</b>	<b>Gender:</b> Male <input type="checkbox"/> Female <input type="checkbox"/>	<b>Birth Certificate seen:</b> Yes <input type="checkbox"/> No <input type="checkbox"/>
<b>Full Home Address (Including post code):</b>		
FAMILY DETAILS		
Parent/Carer Contact Details 1 (EMERGENCY CONTACT)		
<b>Parent/Carer Full Name</b>	<b>Relationship to Child:</b>	
<b>Day Time/Work Tel:</b>	<b>Home Tel:</b>	
<b>Mobile:</b>	<b>Email:</b>	
<b>Full Home Address (if different to child's)</b>		
Parental Responsibility for child? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Parent/Carer Contact Details 2 (EMERGENCY CONTACT)		
<b>Parent Carer Full Name:</b>	<b>Relationship to Child:</b>	
<b>Day Time/Work Tel:</b>	<b>Home Tel:</b>	
<b>Mobile:</b>	<b>Email:</b>	
<b>Full Home Address (if different to child's)</b>		
Parental Responsibility for child? Yes <input type="checkbox"/> No <input type="checkbox"/>		

**EMERGENCY CONTACT DETAILS – IF PARENTS NOT AVAILABLE (MUST BE LOCAL)****Contact 1****Name:****Relationship to child:****Tel Numbers:****Authorised to collect:**Yes No **Contact 2****Name:****Relationship to child:****Tel Numbers:****Authorised to collect:**Yes No **Contact 3****Name:****Relationship to child:****Tel Numbers:****Authorised to collect:**Yes No **Password for Collection:****ABOUT YOUR CHILD****Does your child have previous experience of attending a childcare setting? If so please specify:****Is there any other information that we need to know about family situations? Court orders, contact details etc:****Does your child have any ongoing medical conditions? Is so please specify:****Do you have any external agencies involved with your child? If so please specify:****Does your child have any food allergies or intolerances? Is so please specify:****Has your child received all up to date immunisations?**Yes  No **Does your child have any special needs or disabilities? If so please specify:**

**ABOUT YOUR CHILD CONTINUED**

**If your child is aged between 24 – 36 months, has a two year old progress check already been completed for your child? (please circle where appropriate):**

**Yes****No****Setting and date completed:**

As per requirements of the Early Years Foundation Stage we will complete a progress check on your child between the ages of 24 – 36 months. We will ask you to be involved in completing the check and will discuss it with you.

**If your child is aged three years or over, does he or she have difficulty with any of the following? (please circle where appropriate):**

<b>Speaking and communicating</b>	<b>Yes</b>	<b>No</b>
<b>Listening and attending</b>	<b>Yes</b>	<b>No</b>
<b>Understanding simple instructions</b>	<b>Yes</b>	<b>No</b>
<b>Eating and drinking</b>	<b>Yes</b>	<b>No</b>
<b>Sitting and sharing a book</b>	<b>Yes</b>	<b>No</b>
<b>Walking and climbing</b>	<b>Yes</b>	<b>No</b>
<b>Rolling a ball</b>	<b>Yes</b>	<b>No</b>
<b>Holding a crayon</b>	<b>Yes</b>	<b>No</b>
<b>Socialising with adults and other children</b>	<b>Yes</b>	<b>No</b>
<b>Using the toilet</b>	<b>Yes</b>	<b>No</b>
<b>Putting on their shoes and socks</b>	<b>Yes</b>	<b>No</b>

**Any other concerns (please specify):**

**Are any of the following in place for your child? (please circle where appropriate)**

<b>SEN action plan</b>	<b>Yes</b>	<b>No</b>
<b>Education, Health and Care Plan</b>	<b>Yes</b>	<b>No</b>

**What support will he or she require in our setting**

**DETAILS OF PROFESSIONALS**

Doctors Name and Practice Details:

Health Visitors Name and Tel (If applicable):

Is your child currently in the care of a local Authority? Is so please give details:

Social Care Worker (If applicable):

**ETHNIC/CULTURAL BACKGROUND**

How would you describe your child's ethnicity or cultural background? (Please circle)

**White**

British

Irish

Traveller of Irish Heritage

Any Other White Background

**Mixed**

White and Black Caribbean

White and Black African

White and Asian

Any other mixed background

**Asian or Asian British**

Indian

Pakistani

Bangladeshi

Any other Asian background

**Black or Black British**

Caribbean

African

Any other black background

**Any other background**

Nationality:

Country of Birth:

Religion:

First language (spoken at home):

Bilingual Support plan needed?

Yes  No **KEY PERSONS – INFORMATION FOR PARENTS**

Each child joining the setting will have a key person appointed to them. It will be the key persons responsibility to ensure that your child receives the best possible attention whilst in our care and to ensure that their records are kept up to date. Your child's key person may change as your child progresses through the setting. You will be notified of these changes. Your child's key person is your first point of contact for anything you wish to discuss about your child.

**Your child's Key person will be:****DECLARATION**

Please sign below to indicate that the information given on this form is accurate and correct, and that you will notify us of any changes as they arise.

SIGNED:

PRINT NAME:

DATE:

**Little Herons Pre-School**  
**Standard Activities/General Permission Form**



Childs name: .....

- **Short Trips – General Outings**

Your child will be taken out of our setting as part of the daily activities. The venues used are detailed here:

Visits to Willows and Wetlands Visitor Centre, Park, Allotment, Coffee Shop, Church, Village walks.

**I understand that:**

- Such activities will normally take place within the Pre-School day, but that if occasionally, they are likely to extend beyond this, adequate advance notice will be given so that I may make appropriate arrangements for my child's return home.
- My specific permission will be sought for any external activities beyond those outlined above and which could involve commitment to extend journeys or times, expense or adventure activities.
- All reasonable care will be taken of my child in respect of the activity/visit.
- I must inform the Pre-School of any medical condition or physical disabilities now and as and when they arise.

**General parental permissions**

- **Emergency treatment declaration**

In the event of an accident or emergency involving my child I understand that every effort will be made to contact me immediately. Emergency services will be called as necessary and I understand my child may be taken to hospital accompanied by the manager (or authorised deputy) for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

- **For inhalers/auto-injectors (e.g. Epipens) only**

I give permission for a named member of staff who has been appropriately trained to administer the inhaler/Epipen.

- **Nappy cream**

I give permission for nappy Cream (supplied by parent) to be administered to my child.

- **Sun cream**

I give permission for staff to administer hypoallergenic sun cream (supplied by parent) to my child.

- **Face paint**

I give permission for my child to be allowed to wear face paints.

- **Animals**

We occasionally have supervised visits of animals to our setting. A risk assessment will be carried out for visiting animals, and parents informed.

Please state below any known allergies or aversion (name of child)

has to animals:

I agree to all of the above

Full name of Parent/Carer:.....

Signature of Parent/Carer:.....

Date: .....

**Little Herons Pre-school**  
**Consent form for the recording and use of images and sound**

**Photography / Observations** – *I agree / disagree (please delete)* with Little Herons taking photos of our child for displays & observation purposes & occasional advertising of Pre-school in local press/website. Also, during the sessions your child attends they will be observed by the Pre-school staff to ensure their development needs are being met by the setting.

Please tick the boxes below to confirm your specific consent for –

- Photographs in the prospectus and other promotional publications**
- Photographs for displays/observations in the setting**
- Photographs for displays outside the setting (eg. Village shop)**
- Photographs for local newspaper**
- Photographs for North Curry/Little Herons website**
- Photographs for Little Herons Social and North Curry School media pages (Facebook, Instagram and Twitter) Public Account – Used for advertisement**
- The Pre-school can use your child's first name to appear with the any image on the website/media**
- The Pre-school can publish sound recordings of pre-school activites that include Your child**

**Parent photographs** – I agree not to post photographs of children in the Pre-School on Facebook or any other social networking site even if permission was given to take the photo.

Name of Child.....

Signed.....

Relationship to child.....

Dated.....

## 10.3. Little Herons Pre-School Contract



Our Pre-School offers supporting services, as outlined in our Prospectus. **However, parents/carers are in the first instance the most important educators of their young children. The work of the Pre-School cannot be fully effective unless the Pre-School and the parents/carers work together in the child's interest.**

We ask you please to read and sign the contract below as an expression of this shared commitment.

**Parents/Carers Participation** – I will join in the life of the Pre-School for as long as our child attends. I would be particularly interested in: (Please Circle)

Making / Mending equipment

Help Fundraising

with FONCS

**Parent/Carer Contact Details** – I agree to keep the Pre-School informed of changes to our telephone/mobile number and change of address details.

**Shared Record keeping** – I will contribute to our child's development record produced jointly by parents / carers working with the staff to identify & meet our child's educational, personal, social needs & to implement decisions taken in the interest of our child.

**Fees** – I will pay for fees in the amounts & the time specified by the Pre-School. I will pay for our child's sessions booked, whether our child attends or not. I will also give 6 weeks notice if we wish to decrease and/or end our child's sessions. If notice is not given, I agree to pay 6 weeks fees based on our child's last week of sessions booked. I understand that additional services (Forest School etc) will incur additional fees and I agree to pay if my child attends on these days.

**Funding** – I will supply a copy of my child's Birth Certificate or Passport as required by the Local Authority to apply for Early Years Entitlement (EYE) funding.

**Punctuality** – I will not to be late in arriving at the start or collecting our child at the end of the session. If an occasion does arise I will contact the Pre-School. I understand that the Pre-School reserves the right to charge for late collection of a child at the rate specified in the Pre-School Fees Policy.

**Sickness** – I agree not to bring our child to the Pre-School at least 48 hours after the last occurrence of sickness or diarrhoea. I agree not to bring our child into the Pre-School if they have been diagnosed with a contagious illness (e.g. Chicken pox, slap-cheek or any other illness which could affect pregnant women).

**Absences** – If your child is going to be absent during a session, for any reason, please could you telephone us on **01823 490 423**. This can be done before session time as a message can be left that will be picked up by staff before the beginning of the day.

Name of child.....

Signed.....

Relationship to child.....

Date.....

# Booking Form



Child's Name.....

Term (Please Circle):      Autumn 2020                      Spring 2021                      Summer 2021

Sessions Required:    Please circle/tick the sessions you wish to book.

Monday	Tuesday	Wednesday	Thursday	Friday*
08.45am – 1.00pm	08.45am – 1.00pm	08.45am – 1.00pm	08.45am – 1.00pm	08.45am – 1.00pm
08.45am – 15.15pm	08.45am – 15.15pm	08.45am – 15.15pm	08.45am – 15.15pm	08.45am – 15.15pm

Our hourly rate is £4 per hour. Any hours in excess of the 15 hours (or 30 hours, if eligible) per week entitlement must be paid for by the parent/carer

**\* Please note that Forest School may take place on Fridays for which there may be an additional charge for transport (at present this is £5.00 weekly) - please check before booking.**

Start date.....

Signed.....

Dated.....

***It is Little Herons policy to invoice for placement booked and not for the child's actual attendance. Little Herons requests six weeks notice for any decrease or end in sessions.***