



Wargrave Pre-School Registration form

Childs Details:

Name (first and last name):

Date of Birth:

Address:

Gender:

Ethic Origin:

First Language:

If English is not your child's first language or main language spoken at home, will this be your child's first experience of being in an English speaking environment?

Does your child need a bilingual support plan?

What is the main religion in your family?

What festivals are celebrated in your culture that you would like to see celebrated within the setting?

Does your child have any special needs or disabilities? If so, please specify:

Are any of the following in place for your child?

SEN action plan:

EHCP:

What extra support may your child require in our setting?

Is your child involved with or waiting for access to any outside agency? For example, but not limited to, portage, health visiting team, speech and language.

Two year old progress check – children aged 24 – 36 months. If your child is ages between 24 – 36 months, as per the requirements of the early year's foundation stage, we will complete a progress check on your child.

Has your child already had a two year progress check completed for them?

If so, what was the settings name and date the check was done?

GP: Name/Address and number:

Social Care Worker (if applicable), Name/Number and Email:

What is the reason for the involvement of the social care department?

Does your child have any health conditions/needs we should be aware of?

Does your child have any allergies/dietary requirements?

Does your child attend any other childcare setting?

Any other comments about your child that you would like to add?

Parent/Guardian 1

Name (first and last name):

Mobile Number:

Email:

Address, if different to child's:

Place of work and contact number:

Parental Responsibility? Y/N

Parent/Guardian 2

Name (first and last name):

Mobile Number:

Email:

Address, if different to child's:

Place of work and contact number:

Parental Responsibility? Y/N

Sessions Required

Please mark with an x

	Breakfast Club (8.30-9.00)	AM sessions (9.00 – 12.00)	PM session (12.00 – 3.00)	Late finish (3.00- 3.30)
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

Start date:

Do you receive funding? If so, 15 hours or 30 hours?

Emergency Contacts

Please list 3 emergency contacts who the Pre-School can call if we cannot get in contact with you.

Emergency contact 1 – Name, relationship and number:

Emergency contact 2 – Name, relationship and number:

Emergency contact 3 – Name, relationship and number:

Collection Statement

The Pre-School will allow collection by individuals listed below as ‘authorised to collect.’

Any named person collecting your child will be asked to provide the agreed password, stated below. If the password does not match, we will not release your child.

Should anyone not listed try to collect your child, we will contact you immediately and will not release your child to them.

If your child is not collected from Pre-School by closing time, the manager will contact you to clarify the situation. In extreme circumstances, the only solution may be to contact the local authority.

Authorised to collect

I, the parent/guardian, give permission for the following named persons to collect my child from Pre-School in my absence.

Name (first and last):

Relationship:

Password:

Authorised to collect without prior confirmation? Y/N

Name (first and last):

Relationship:

Password:

Authorised to collect without prior confirmation? Y/N

Name (first and last):

Relationship:

Password:

Authorised to collect without prior confirmation? Y/N

Medical Statement

If your child becomes unwell in our care we will, in the first instance make every effort to contact you.

If, however we are unable to make contact and your child has a high temperature, we will administer paracetamol, i.e. calpol. If your child is suffering from an allergy symptom, Chlorphenamine maleate, Eg piriton will be administered if consented below.

In we are seriously concerned we will call 999.

It is your responsibility to let us know of any changes to your child's health.

1. I consent to my child being given paracetamol, i.e. calpol at the appropriate age dosed Y/N
2. I consent to my child being given Chlorphenamine maleate, i.e. piriton at the appropriate age does Y/N

Is your child up to date with all their vaccines?

Outings and trips

I do/do not agree to my child going on outings/trips with Pre-School staff which will include visiting the local park, walks on the recreation ground, visits to our allotment and trips around the local village.

Tapestry

We use an online early year's app called tapestry to upload photos/videos and log your child's development which staff and parents can access. Only staff and parents can access their child's profile but some of the photos we upload may include other Pre-School children if the photos are taken during group activities. Please indicate below if you do not want photos that your child may appear in to be uploaded to other children profile.

Photography

I give/I do not give consent for my child's photo to be used on social media (Facebook and Instagram)

I give/I do not give consent for my child's photos to be used on internal displays

I give/I do not give consent for my child to have photos taken by an external professional photographer (they will be DBS checked, a member of staff always will be present and the photos will be available for you to purchase, these photo shoots will always be pre planned and parents made aware of)

I give/I do not give consent for my child's photo to be used for marketing purposes. i.e. website/posters/leaflets/Wargrave news

Please sign to confirm all the above information you have filled out is true and accurate and that you have also read and understood the parent handbook.

Parent/Guardian 1

Name:

Signature:

Date:

Parent/Guardian 2

Name:

Signature:

Date: