

Registration Form Details

Name of child (in full)

Date of birth

Name known as

Name of Parent/s with whom the child lives

.....

Does this Parent have responsibility? Yes/No (delete applicable)

Does this Parent have Parental responsibility? Yes/No (delete applicable)

Address of Parent

.....

Telephone Number..... Mobile.....

Name of Parent with whom the child does not live

.....

Parent 1-Work/daytime contact number

N.I Number :

Parent 2-Work/daytime contact number

N.I Number :

Emergency contact when parent is unavailable

Name.....

Telephone number.....Mobile.....

Name

Telephone number

Mobile.....

Persons authorised to collect the child

NameRelationship to child.....

Telephone number.....Mobile.....

Password for collecting children

How would you describe your child's ethnicity or cultural background?

.....

What language(s) is/are spoken at home?

Does your child have any specific needs or disability/allergies?

Yes/No (delete applicable) Details (if yes)

.....

Do you have a health visitor? Yes or No (delete applicable)

NameBased at.....

Telephone

Does your family have a social care worker for any reason?

Yes/No (delete applicable)

NameBased at

Telephone.....

What is the reason for the involvement of social care department with your family/

.....

..... **To be
completed by the key person/manager**

Date starting at (Name and setting)

Days and times of attendance.....

Are any fees payable? If so, note here

Name key person

Name of key back up person

Has the settling in process been agreed? Yes/No (delete applicable)

If so, detail.....

.....

**I consent for my child to be taken out as part of the daily activities of the setting.
I/We understand that our further consent will be requested for major outings**

**I consent for the staff to take my child to the nearest Accident and Emergency unit to be
examined, treated or admitted as necessary on the understanding that I/We have been
informed and are on my/our way to the hospital.**

**I give consent for my child to have photographs taken for profile, advertising events and
displays around the nursery.**

Signed by

Parent 1Parent 2

Date

Under the “terms and conditions of payment and attendance”

1. Accounts are due for payments upon presentation, unless you are in receipt of vouchers, wherein if there is any balance to pay, this will be paid immediately. Failure to do so, and after a reminder has been sent, if your account remains outstanding, the nursery reserve the right to assign your account to our contracted debt collectors, wherein you will incur all charges for the recovery of the debt, including all court costs.
2. Fees are payable four weekly in advance by standing order, cash or cheque.
3. If your child leaves the nursery, four weeks’ notice in writing is required which must be acknowledged by the director of nursery manager/deputy.
Reduction or changes in your child’s agreed hours will require one month’s written notice to the director/manager.
4. Failure to give the above notice or payment of fees will result in a payable penalty of interest charged at 8% pa under the County Court Act 1984 Section 69, this charge will only be paid when in court.
We will charge 8% pa from 30 days after the date of invoice.
5. Failure to pay your account within the month of issue will result in a 5% charge being added to the outstanding balance and will be shown on the following months account. The 5% charge will stand month to month until the outstanding amount has been paid off. Failure to make these payments will result in point 4 action taken.
6.
The nursery cannot undertake the care of sick children, although children requiring regular medication are welcome by special arrangement with the director/manager. Those sessions not attended by your child due to sickness & voluntary holiday leave will not qualify for a refund.
7. There is no charge for Bank Holiday & Christmas shut down period.
8. If you are late collecting your child a charge will be made. The amount payable will be at the discretion of the nursery.
9. Cheques are to be made payable to “**Little Clowns Nursery Ltd**”.

I, the new parent, have read and more importantly understand the full implications of the terms and conditions of the nursery.

Signed..... Date.....

1) Parent/Carer

Signed.....Date.....
2) Parent/Carer

Signed.....Date.....
Director of Little Clowns Day Nursery