

## REGISTRATION FORM

Please complete **ALL** areas

Childs Photo

|                            |                      |                  |                                 |                       |
|----------------------------|----------------------|------------------|---------------------------------|-----------------------|
| <b>Child's First Name:</b> | <b>Middle names:</b> | <b>Surname:</b>  |                                 |                       |
| <b>Date of birth:</b>      | <b>Gender – M/F</b>  | <b>Religion:</b> | <b>Language spoken at home:</b> | <b>Ethnic origin:</b> |

|  |                    |                                 |                            |  |                    |                                 |                            |
|--|--------------------|---------------------------------|----------------------------|--|--------------------|---------------------------------|----------------------------|
| <b>Parent/Carer's 1 name and title (Mr/Mrs etc):</b> |                    |                                 |                            | <b>Parent/Carer's 2 name and title (Mr/Mrs etc):</b> |                    |                                 |                            |
| Address:   |                    |                                 |                            | Address:   |                    |                                 |                            |
| Postcode:  |                    |                                 |                            | Postcode:  |                    |                                 |                            |
| Contact telephone number 1:                          |                    |                                 |                            | Contact telephone number 1:                          |                    |                                 |                            |
| Contact telephone number 2:                          |                    |                                 |                            | Contact telephone number 2:                          |                    |                                 |                            |
| Email:   |                    |                                 |                            | Email:   |                    |                                 |                            |
| Date of birth:                                       |                    |                                 |                            | Date of birth:                                       |                    |                                 |                            |
| NI number:   |                    |                                 |                            | NI Number:   |                    |                                 |                            |
| Relationship to child:                               |                    |                                 |                            | Relationship to child:                               |                    |                                 |                            |
| Security Password:                                   |                    |                                 |                            | Security Password:                                   |                    |                                 |                            |
| <b>Emergency Contact?</b>                            | <b>Bill Payer?</b> | <b>Parental Responsibility?</b> | <b>Authorised Pick-up?</b> | <b>Emergency Contact?</b>                            | <b>Bill Payer?</b> | <b>Parental Responsibility?</b> | <b>Authorised Pick-up?</b> |

|   |                    |                                 |                            |   |                    |                                 |                            |
|---|--------------------|---------------------------------|----------------------------|---|--------------------|---------------------------------|----------------------------|
| <b>Other Contact 3 - Name and title (Mr/Mrs etc):</b> |                    |                                 |                            | <b>Other Contact 4 - Name and title (Mr/Mrs etc):</b> |                    |                                 |                            |
| Address:  |                    |                                 |                            | Address:  |                    |                                 |                            |
| Postcode:   |                    |                                 |                            | Postcode:   |                    |                                 |                            |
| Contact telephone number:                             |                    |                                 |                            | Contact telephone number:                             |                    |                                 |                            |
| Relationship to child:                                |                    |                                 |                            | Relationship to child:                                |                    |                                 |                            |
| Security Password:                                    |                    |                                 |                            | Security Password:                                    |                    |                                 |                            |
| <b>Emergency Contact?</b>                             | <b>Bill Payer?</b> | <b>Parental Responsibility?</b> | <b>Authorised Pick-up?</b> | <b>Emergency Contact?</b>                             | <b>Bill Payer?</b> | <b>Parental Responsibility?</b> | <b>Authorised Pick-up?</b> |

**Does your child/family have social services involvement/or has had in the past? Yes/No**

**If so – what is reason for involvement?**

|       |           |
|-------|-----------|
| Name: | Based at: |
| Tel:  | Email:    |

**Does your child have any special educational needs or disabilities? Yes/No. If Yes, please give details:**

**Does your child attend another setting e.g. nursery/childminder? Yes/No. If Yes, please give details.**

|  |          |
|--|----------|
| Name:                                    | Address: |
| Contact key person:                      | Tel:     |
| Permission to share information - Yes/No | Email:   |

|   |   |
|---|---|
| <b>How did you hear about us – tick which apply:</b> <ul style="list-style-type: none"><li>• Website</li><li>• Radio</li><li>• Flyer</li><li>• Word of Mouth</li><li>• Health Professional</li><li>• Local paper/community magazine</li></ul> | <b>Other – Please state how you heard about Kamelia Kids:</b> |
|---|---|

**Registration Admin Fee**  
A non-refundable registration fee of £75 per child on acceptance of a place (excluding children only accessing their Free Entitlement Funding and 2 year old funding when they enter the nursery) will be charged.

**Acceptance:**  
The terms and conditions are considered to be fair and reasonable. In the event of any term found by a Court of Law to be unreasonable then the clause shall be removed but the agreement shall remain in full force and effect.

**PLEASE NOTE:**  
After acceptance of the offer by the parent/carer either party may terminate this agreement by giving 4 weeks' notice in writing to the Nursery Manager during which time the child may continue to attend the nursery. In the event of the child being withdrawn immediately then 4 weeks fees will be due in lieu of notice.

*This registration form incorporates the terms and conditions which are shown below. Upon signing this form the parents are deemed to have read, understood and agreed the same.*

*For fees please refer to separate sheet.*

**Parent/Carer signature**

**Print name:**

**Date:**

## FULL YEAR SESSIONS – ATTENDANCE SCHEDULE

(Limited availability for term-time only sessions)

To be agreed with Nursery Management

| SESSIONS       | Duration | Session Times    | Mon | Tues | Wed | Thurs | Fri |
|----------------|----------|------------------|-----|------|-----|-------|-----|
| Maxi Morning   | 5.5hrs   | 8am - 1.30pm     |     |      |     |       |     |
| Mini Afternoon | 3hrs     | 1.30 pm - 4.30pm |     |      |     |       |     |
| Maxi Afternoon | 5hrs     | 1pm - 6pm        |     |      |     |       |     |
| Maxi Day       | 8.5hrs   | 8am - 4.30pm     |     |      |     |       |     |
| Full day       | 10hrs    | 8am - 6pm        |     |      |     |       |     |

### KOOL KIDS CLUBS

**Breakfast** - includes breakfast served 8am – 8.30am / **After School Club** – includes tea

|                   |              |  |  |  |  |  |  |
|-------------------|--------------|--|--|--|--|--|--|
| Breakfast         | 8am - 9am    |  |  |  |  |  |  |
| After School Club | 3pm – 4.30pm |  |  |  |  |  |  |
|                   | 3pm - 6pm    |  |  |  |  |  |  |

I give permission for my child to be collected from school on the days selected as above.

Signature:

Date:

### OFFICE USE ONLY

|  |                    |                       |
|--|--------------------|-----------------------|
| Admin fee paid                               | Yes/No             |                       |
| 2 year old or FE form completed and attached | 2 year old number: | Yes/No/Not applicable |
| Birth certificate seen                       | Yes/No             |                       |
| Birth Certificate Number:                    |                    |                       |
| Agreed Start date:                           |                    |                       |
| Print name:<br>(on behalf of Kamelia Kids)   | Signature          |                       |
| Data uploaded onto Parenta database – Yes/No | Entry number:      |                       |

### IMPORTANT NOTICE – GENERAL DATA PROTECTION REGULATION (GDPR)

In compliance with GDPR, any information you provide here will be kept secure and treated confidentially. The data collected will only be used by Kamelia Kids and will not be disclosed to any external sources without your prior consent unless required to do so by law.

## IMPORTANT – PARENT/CARERS CONSENT

| Child's Full Name                                |  |                        |      |
|--|--|------------------------|------|
| Area of Consent                                  | Statement  | Parent/Carer Signature | Date |
| <b>First Aid</b>                                 | <p>I hereby give consent for my child to be given any emergency first aid treatment as deemed necessary by the staff of the nursery.</p> <p>I will inform the staff of any known allergies that may affect treatment.</p>  |                        |      |
| <b>Medication</b>                                | I give my consent for any prescribed medication that I have given to the staff to be administered to my child by them and agree to completing the necessary form(s) to enable this to happen.  |                        |      |
| <b>Sun Cream &amp; Baby Wipes</b>                | I give consent for baby wipes and nursery sun-cream to be used on my child by the nursery staff. I understand brands may vary but will always be suitable for use. Please provide your own if preferred.   |                        |      |
| <b>Photographs, Videos &amp; Social Media</b>    | <p>I give consent for my child to be photographed/videoed whilst in nursery or on outings for Nursery displays internally – Yes/No.</p> <p>I give consent for my child to be photographed/videoed whilst in nursery or on outings for Nursery on the website Yes/No.</p> <p>I also give consent for my child to appear in photographs/videos taken by or for other parents to mark special events (such as birthdays, events and Christmas parties).</p>   |                        |      |
| <b>Collection by other named person</b>          | <p>I may need someone other than myself to collect my child from nursery. I will inform a staff member at the beginning of the session. The following named individuals may collect my child;</p> <p>1.</p> <p>2.</p> <p><b>My password is:</b></p> <p>This is for emergency purposes only.</p> <p>If someone not named above has to collect my child and I have not signed the collection book.</p>   |                        |      |
| <b>Off-site outings</b>                          | I give permission for Kamelia Kids staff members to take my child off site for walks or local outings.   |                        |      |
| <b>Outside agencies</b>                          | <p>On a regular basis we have outside agencies i.e. Health visitor, Speech &amp; Language, Physiotherapist and Occupational Therapists, Portage, Sensory support, Educational Psychologists and Nurseries etc. visiting to see individual children at the nursery.</p> <p>We will inform you if anyone is visiting your child, but we would like your written permission, to pass on any relevant information about your child to the professional concerned.</p> <p>This will include sharing information in your child's Learning Journal/ 2 year progress check</p> |                        |      |
| <b>General Data Protection Regulation (GDPR)</b> | <p>By signing this box, you accept that Kamelia Kids will store all information pertaining to your child securely and confidentially and understand that it will only be used for nursery purposes and not shared unless required to do so by law.</p> <p>By signing this box, you agree to Kamelia Kids sending you information/updates regarding your child by email/letter or telephone. If at any time in the future you wish to cancel this you can do so simply by contacting the nursery.</p>   |                        |      |

## IMPORTANT – MEDICAL INFORMATION

|   |  |
|---|--|
| <b>Child's full name:</b>   |  |
| <b>Doctor's name and practice address</b>   |  |
| <b>Doctor's telephone number</b>  |  |
| <b>Immunisations/vaccinations – please list</b>   |  |
| <b>Health Visitor name &amp; contact telephone number</b>   |  |
| <b>Any allergies – please list</b>  |  |
| <b>Any other useful information</b>   | If necessary, please add on a separate sheet |
| <p>The parent/carer agrees to collect a child who becomes ill whilst in the care as soon as possible &amp; abide by our exclusion period.</p> <p>They also agree to inform us if their child contracts an infectious disease or head lice.</p> <p>The nursery staff do their best to comfort children who become ill during the day &amp; we will inform you as necessary. We will also advise you of any outbreaks of infectious diseases or cases of head lice.</p> |  |

**I agree that this information is up to date and accurate and accept that it is my responsibility to inform the nursery of any changes to this information.**

|                               |              |
|-------------------------------|--------------|
| <b>Parent/Carer signature</b> |              |
| <b>Print name:</b>            | <b>Date:</b> |

## STATISTICAL DATA

Please complete the following details where applicable – by placing a tick (✓) alongside. This information is used purely for statistical purposes only.

| Nationality:  | Language :  | Religion:   | Ethnic Origin:  |
|---|---|---|---|
| African<br>American<br>Australian<br>Brazilian<br>British<br>Canadian<br>Chinese<br>Dual Nationality<br>Dutch<br>French<br>German<br>Indian<br>Irish<br>Japanese<br>Polish<br>Portuguese<br>Spanish | Chinese<br>Creole<br>Creole / English<br>Dutch<br>English<br>Esperanto<br>French<br>German<br>Greek<br>Italian<br>Japanese<br>Polish<br>Portuguese<br>Somali<br>Spanish | Baptist<br>Buddhist<br>Catholic<br>Christian<br>Church Of England<br>Church Of Scotland<br>Hindu<br>Islam<br>Jehovah Witness<br>Jewish<br>Methodist<br>Muslim<br>None<br>Shinto<br>Sikh | Asian Bangladeshi<br>Asian Indian<br>Asian Other<br>Asian Pakistani<br>Black African<br>Black African Other<br>Black African Somali<br>Black Caribbean<br>Black Other<br>Chinese<br>Declined<br>Greek Or Greek Cypriot<br>Gypsy/Roma<br>Irish<br>Mixed Other<br>Mixed White And Asian<br>Mixed White And Black African<br>Mixed White And Black Caribbean<br>Not Obtained<br>Other<br>Other Vietnamese<br>Refused<br>Traveller Of Irish Heritage<br>Turkish/Turkish Heritage<br>Unknown<br>White British<br>White European<br>White Other |

## TERMS AND CONDITIONS

### Parents/Carers agree to:

#### Registration/Acceptance/Termination/Variation

1. Pay a non-refundable registration fee of £75 per child on acceptance of a place (excluding children only accessing their Free Entitlement Funding and 2 year old funding when they enter the nursery). This fee covers administration and settling sessions;
2. After acceptance of the offer by the parent/carer either party may terminate this agreement by giving 4 weeks' notice in writing to the Nursery Manager during which time the child may continue to attend the nursery. In the event of the child being withdrawn immediately then 4 weeks fees will be due in lieu of notice;
3. If in the reasonable opinion of the Nursery Manager it is considered that the continued presence of the child would be detrimental to the health, safety or well-being of the child or other children of the nursery or the staff then the nursery may serve notice to the parent/carer or a request for the child to be immediately removed from the nursery and the provision of 4 weeks' notice shall not apply;
4. Any variation of this agreement must be confirmed in writing by both the parent/carer and the Nursery Manager.
5. Any reduction to sessions requires 4 weeks' notice in writing;
6. Any permanent changes to sessions will incur a £10 admin fee per change to cover the additional administration work generated and must be agreed in writing with the Nursery Manager.
7. **Ad hoc/Emergency sessions. We understand that occasionally it may be necessary to book ad hoc or emergency sessions. In all cases, these sessions must be booked with the Nursery Manager and will be charged at an hourly rate of £7.50 or the normal hourly rate + £10 admin fee, whichever is the cheaper regardless of the age of the child.**

#### Payment of Nursery Fees:

8. **Pay the nursery fees in advance, on the first day of each month, by cash, cheque (payable to 'Kamelia Kids'), internet banking (bank details will be on the invoice), standing order (form supplied on request) or by a voucher scheme through your employer, please use your child's name as a reference on any form of payment;**
9. Failure to comply could result in sessions being suspended until full payment is made. If the payment of fees remain outstanding for more than 2 weeks a £10 charge will be added to the next invoice and the nursery may serve 2 weeks' notice in writing to terminate this contract. Upon termination of this contract the child shall cease to be admitted to the nursery and the nursery's notice to so terminate shall be regarded as a formal demand for all outstanding monies;
10. Part sessions will be charged at the full rate. Sessions missed due to sickness or holiday will be charged at the full rate. Fees are also charged for Public and Bank holidays;
11. The nursery reserves the right to increase the fees at any time upon giving 4 weeks written notice of the proposed increase;
12. If the nursery has to close for reasons beyond our control refunds of fees will not be given unless at the discretion of the management;
13. **Arrive and collect the child on time. A fee will charged for repeated late collections at £10 per quarter hour or part thereof. Persistent lateness may result in sessions being suspended. Please see our late collections policy.**

#### Sickness & Medication:

14. Inform the nursery if the child has had any form of illness within 24/48 hours of their session and respect the nursery's decision on whether or not to admit the child. Understand that if the child has experienced any form of vomiting or diarrhoea within 48 hours of their session, they must NOT be sent to the nursery;
15. Inform the nursery of any medication prescribed by the doctor and give written permission (including dosage instructions) for the staff to administer the medication if required;

#### Other:

16. Give permission for the child to be observed and assessed by key staff whilst at Kamelia Kids Day Nursery;
17. Understand that Kamelia Kids Day Nursery cannot take responsibility for the loss or damage to any personal belongings;
18. Provide suitable emergency contacts and update when necessary;
19. Ensure your child is appropriately dressed for nursery e.g. coat, suitable shoes;
20. Provide suitable healthy snack and/or lunch for your child;
21. Inform the nursery of any agencies working with the child/family i.e. social services;
22. Drive and park considerately and safely – avoid parking in the staff car park and emergency vehicle area;
23. Abstain from smoking outside the nursery building or adjacent grounds;
24. Use appropriate language in or around nursery grounds (no swearing).
25. Parents and visitors are requested not to use their mobile phones whilst on the premises.

#### Early years Free Entitlement and 2 years funding

Kamelia Kids Day Nursery is currently registered to receive statutory Free Entitlement and 2 year old funding subject to availability.

#### I have read and understood the terms and conditions above.

|                        |       |
|------------------------|-------|
| Parent/Carer signature |       |
| Print name:            | Date: |

## TERMS AND CONDITIONS – PARENT/CARER COPY

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|                        |       |
|------------------------|-------|
| Parent/Carer signature |       |
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