



Registration Form

Please tick the Nursery you want your child to attend:

NEWCASTLE:

Cherry Tree House,
Grainger Park Road,
Newcastle upon Tyne,
NE4 8SX. Tel: 0191 298 3333
email: newcastle@cedarsnursery.co.uk



SUNDERLAND:

Copper Beech House,
The Cedars,
Ashbrooke, Sunderland,
SR2 7TW. Tel: 0191 565 2549
email: sunderland@cedarsnursery.co.uk



CHILD'S DETAILS

Child's full name: Name normally used:

Date of birth:..... Gender: Male Female Religion:.....

CHILD'S REGISTERED ADDRESS

House No./Name:..... Street:..... Postcode:

REQUESTED DAYS/SESSIONS

Required Date of Commencement:..... Anticipated Date of Leaving:.....

We take children from 3 months old up until Reception. We take funded children under Government schemes. All children receive 15 hours funding the term after their third birthday. Please tick if you believe you may be entitled to funding (note an additional check with council is necessary). Funded (FEYE) education places are subject to availability* Please speak to the Nursery Manager for further details.:

2 Year Old Entitlement Place if eligible* 3/4 Year Old Early Years Free Entitlement Place, 15 hours*

3/4 Year Old Early Free Entitlement Extended 30 hours if eligible*

We are open 51 weeks a year and places are planned year round to give best care options unless you specify term time only. We will try to give you the sessions/days you select, however we may need some flexibility in order to accommodate your child. All places are subject to availability.

| | Mon | Tue | Wed | Thurs | Fri |
|------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Day (8am- 6pm) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Morning Session (8am-1pm) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Afternoon Session (1pm-6pm) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Early Bird Session (7.30am - 8am separate £8 charge) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PASSWORD

A password (chosen by you) will be used to check your identity at the entrance until you are recognised by staff. If another adult (over 18 years old) will be collecting your child please let us know to expect them and they must have photo ID and know the password. Please do not open the door for other parents/carers.

Password:

PARENT/CARER DETAILS

Title (Mr, Miss, Mrs, Dr): Date of Birth:

Full Name:

National Insurance Number/National Asylum Support

Service Number:

Address:

..... Postcode:

Tel No 1:

Tel No 2:

Email Address:

Has parental responsibility: Yes No **PARENT/CARER DETAILS**

Title (Mr, Miss, Mrs, Dr): Date of Birth:

Full Name:

National Insurance Number/National Asylum Support

Service Number:

Address:

..... Postcode:

Tel No 1:

Tel No 2:

Email Address:

Has parental responsibility: Yes No **PARENT/CARER WORK DETAILS (if applicable)**

Company Name:

Address:

Town: Postcode:

Tel No:

Email:

PARENT/CARER WORK DETAILS (if applicable)

Company Name:

Address:

Town: Postcode:

Tel No:

Email:

ADDITIONAL FAMILY MEMBERS/FAMILY FRIENDS WHO CAN PICK UP AND BE CONTACTED IN AN EMERGENCY

Must live local to Nursery. Parent(s)/Carer(s) will always be contacted first in an emergency.

Full Name: Full Name:

Relationship to Child: Relationship to Child:

Tel No 1: Tel No 1:

Tel No 2: Tel No 2:

CHILD HEALTH INFORMATION

In the interest of good practice we have a policy of co-operating with your child's GP, Dentist, Health Visitor and Multi-Agency Support Workers (e.g. Social Worker, Speech and Language specialist, SEND Support).

Do you consent to us sharing this information under our GDPR rules: Yes No

Registered GP: Surgery Name:..... Tel No:.....

Registered Dentist: Surgery Name:..... Tel No:.....

Health Visitor: Tel No:.....

Social Worker (if applicable): Tel No:.....

Other Multi-Agency support worker: Tel No:.....

Does your child have a disability/long standing illness/infirmity? Yes No If yes, what is the condition: Do they have any special requirements: Yes No

If yes, please outline of special requirements:

Does your child have any known allergies: Yes No If yes, please specify below:

- | | | | |
|------------------------------------------------------|------------------------------------------------------|-----------------------------------|-----------------------------------------|
| <input type="checkbox"/> Celery (including celeriac) | <input type="checkbox"/> Cereals (containing gluten) | <input type="checkbox"/> Eggs | <input type="checkbox"/> Fish |
| <input type="checkbox"/> Lupin | <input type="checkbox"/> Milk | <input type="checkbox"/> Mustard | <input type="checkbox"/> Nuts & Peanuts |
| <input type="checkbox"/> Sesame | <input type="checkbox"/> Shellfish & Molluscs | <input type="checkbox"/> Soybeans | |
| <input type="checkbox"/> Sulphur dioxide (sulphites) | <input type="checkbox"/> Other: | | |

Information regarding Allergies/Medical Conditions must be supplied by your GP prior to admission e.g. GP letter confirming allergy test results. Please bring your child's red health book with you to the first induction visit and details of any allergy medication.

PAST ILLNESSES, IMMUNISATIONS AND DIETARY REQUIREMENTS

Please select yes (Y) or no (N) to the following:

Past Illnesses

Has your child had the following:

- Chicken Pox: Yes No
- Diphtheria: Yes No
- Hepatitis A: Yes No
- Hepatitis B: Yes No
- Measles: Yes No
- Meningitis C: Yes No
- Mumps: Yes No
- Pneumonia: Yes No
- Polio: Yes No
- Rubella: Yes No
- Scarlet Fever: Yes No
- Tetanus: Yes No
- Whooping Cough: Yes No

Immunisations

Has your child been immunised for:

- Chicken Pox: Yes No
- Diphtheria: Yes No
- Hepatitis A: Yes No
- Hepatitis B: Yes No
- Measles: Yes No
- Meningitis C: Yes No
- Mumps: Yes No
- Pneumonia: Yes No
- Polio 2 Months: Yes No
- Polio 3 Months: Yes No
- Polio 4 Months: Yes No
- Rubella: Yes No
- Scarlet Fever: Yes No
- Tetanus: Yes No
- Whooping Cough: Yes No

**Please put a X
in appropriate boxes**

Dietary Requirements:

If your child has a Halal or Kosher diet choose the vegetarian option.

- No Dairy: Yes No
- No Eggs: Yes No
- No Gluten (Coeliac): Yes No
- Vegetarian: Yes No

Other Dietary Requirement:

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PARENTAL/CARER CONSENT

Do you give permission for the following:

- Administer Calpol: Yes No
- Administer Prescribed Medication: Yes No
- Apply Nappy Cream: Yes No
- Apply Sun Cream: Yes No
- Authorise Emergency Treatment: Yes No
- Authorise Tooth Brushing: Yes No
- Allow Off Premises Trips or Visits: Yes No
- Allow Photographs on Social Media: Yes No
- Allow Photographs on Website: Yes No
- Allow Photographs to be used in other marketing materials e.g. advertisements and posters: Yes No
- In the event of an accident, allow a member of staff to take child to hospital: Yes No
- Handle Nursery pets and visiting animals with adult supervision: Yes No

**Please put a X
in appropriate boxes**

ETHNIC ORIGIN OF CHILD

The Local Authority request that we record the ethnic origins of the children in our Nursery and we would be grateful if you would supply this information by ticking the relevant box below and answering the questions.

- WBRI White, British
- WIRI White Irish
- AIND Asian or Asian British, Indian
- APKN Asian or Asian British, Pakistani
- WOTH White, Other Background
- ABAN Asian or Asian British, Bangladeshi
- WROM Gypsy/Roma/Traveller
- AOTH Asian or Asian British, Other Asian Background
- MWBC Mixed, White and Black Caribbean
- BCRB Black or Black British, Caribbean
- MWBA Mixed, White and Black African
- BAFR Black or Black British, African
- MWAS Mixed, White and Asian
- BOTH Black or Black British, Other Black Background
- MOTH Mixed, Other Mixed Background
- CHNE Chinese
- REFU Do not wish to be recorded
- OOTH Any other ethnic background (please state)

Parent/Carer is English your second language? Yes No What is your first language?

Is English your child's second language? Yes No What is child's first language?

CHILDCARE FEES AND AGREEMENT TO CONDITIONS

I understand that fees are paid monthly in advance via Debit/Credit Card, Electronic Bank Transfer, Childcare Voucher Scheme or by cash as shown in our current published Price List. I understand that invoices will be sent via email or in absence of email, given by hand or posted to home address. I understand that it is my responsibility to ensure I have received an invoice before first of month and that payment is due on the 1st of the month (e.g fees for days in July will be due on the 1st July) and that failure to pay fees on due date will incur a surcharge of £75.

I understand that if I am paying fees via vouchers they must be submitted prior to the 1st of each month or they will be credited against the following months fees (please note that the voucher amounts will not be deducted from your account until the Nursery have received your paper voucher or remittance advice via email). I understand that if I abuse my funding hours (e.g. claiming for the same hours at multiple settings) I will be liable for any and all costs incurred.

I understand that my child may be refused access to Nursery if fees are overdue by more than 2 weeks, if they have had an immunisation in the last 24 hours, if they have started prescribed medication in the last 48 hours, if they have an unexplained rash, if they have vomited or had diarrhoea in the last 48 hours, if their piercings are not covered by plasters, or if I have not provided nappies or wipes/suncream despite repeated requests.

I understand that six weeks' notice must be given in writing of my child leaving the Nursery or that six weeks' fees will need to be paid in lieu of such notice. I understand that if I register and reserve a place for my child and my circumstances change and the child does not attend then six weeks' written notice in advance of start date must be given or six weeks' fees paid in lieu of such notice. If you are a funded-only place you must give the nursery 4 weeks' notice of leaving.

Holidays

The Nursery is open throughout the year except for Statutory Public Holidays (SPH) and between Christmas and New Year. We follow our local council's school term dates. We ask that parents/carers let us know if a child will be on holiday but these days/session remain charged at full rate.

Absences

It is important that you let us know immediately if your child is to be absent for whatever reason. Please consult the Communicable Diseases Chart to see if your child is able to attend nursery with their condition and for information on when they will be able to return. Please inform us if your child has had a diagnosis of a Communicable Disease so we can inform other parents/carers/staff. The child will need to be picked up from Nursery immediately if they have vomited or have had three loose nappies/bouts of diarrhoea within an hour. If they have a temperature (which has not reduced in an hour after having been given Calpol or if we have not been given permission to administer Calpol), if they have an unexplained rash or if they appear unwell. Children are welcome to come to Nursery having had Calpol or with minor illnesses such as a common cold, we must be informed of details and time any medication has been administered.

Late Pick-up

Please make sure your child is picked up by 1pm, or 6pm. If you are late by more than 15 minutes you will incur a charge of £8. If you are late by more than 30 minutes you will be charged the rate of a session. Please note that these charges also apply to free places as it is outside their free hour allocation.

Additional Days/Sessions

Any request for an additional day/session must be via email or in writing and will be charged at the rate in the current Price List. Extra days/sessions are subject to availability. Once an additional day/session is booked it must be paid if the child does not attend for whatever reason. Any requests to amend days must be via email or in writing and give 6 weeks' notice. Change of days/sessions dependant on availability.

The signatory is responsible for payment of all outstanding amounts due under the terms of this contract.

Signed:..... Print Name:..... Date:.....

To complete registration please return this form with the **£30 registration fee** in cash (if applicable, funded-only places are exempt) along with the child's original birth certificate (version with parents/carers details) and **proof of address** (e.g. credit card statement, NHS letter, from within the last 3 months). You can drop in these forms at any time and a member of staff will take photocopies of your documents for our records and hand the registration form to the office.

We retain this form under our GDPR standards for official use and only share details with other official bodies. When your child leaves the Nursery the form is securely stored for the recommended GDP period by law.

Office Use Only

Registration fee received (if applicable): Yes No Signed:.....

Third Party Funding Authorised: Yes No Funding Body:..... Date funding starts:.....

2 Year Funding Code Received: Yes No Code:..... Date funding starts:.....

3 Year Extended Entitlement Code Received: Yes No Code:..... Date funding starts:.....

Added to Nursery In A Box by:..... Date:..... Days/Sessions allocated:

Registration Reviewed by: Date: