

Registration Form.

Child's Name:

Date of Birth:

Child's Address:

Mothers Name:

Mother's Address.....

Mother's Telephone No.....

Mother's Email.....

Father's Name:.....

Father's Address.....

Father's Telephone No.....

Father's Email.....

Emergency contact details:

1st Contact No: Name:..... Relationship to child.....

2nd Contact No: Name: Relationship to child.....

3rd Contact No: Name:..... Relationship to child.....

Address of any contacts if not mother or father.....

Person/persons with legal parental responsibility:.....

Who has legal contact with the above named child?:.....

(Usually the person/persons who has legal parental responsibility)

Please bring your child's passport/birth certificate for the manager to see:

Managers signature Date verified

Child's Doctor's Name:

Address & Tel:

Allergies/Important information.....

Names of people NOT permitted to collect your child:

.....

Will your child be attending another setting as well as Humpty Dumpty Nursery?

Please Circle Yes No

If yes which other settling/childminder will your child be attending?.....

Registration Fee £50.00

PAID



Please write below which session you

are:

.....
.....
.....
.....

CONSENT FORM-PART 1

I give my consent for my child(ren) to receive necessary emergency medical and dental treatment, and for an anaesthetic to be administered for an operation if needed.

I understand that this is only to be used in a situation where the nursery staff is unable to contact a parent/guardian.

NAME OF CHILD.....

PARENT'S NAME.....

ADDRESS.....

TEL No.....

SIGNED.....

Any specific Dietary requirements? (Please detail)

.....

Please give details any allergies or medical conditions you feel we need to be informed of, e.g. diabetic, epilepsy, asthma, and convulsions

.....

Do you have any religious considerations? Please give details

.....

Are your child's Immunisations up to date? yes / no (please circle)

Has your child had an of the following childhood illnesses? {please circle}

Chicken pox	yes / no	If yes date occurred.....
Measles	yes / no	If yes date occurred.....
Hand foot and mouth	yes / no	If yes date occurred.....
Impetigo	yes / no	If yes date occurred.....
Conjunctivitis	yes / no	If yes date occurred.....
Slap cheek	yes / no	If yes date occurred.....
Scarlett fever	yes / no	If yes date occurred.....
German measles	yes / no	If yes date occurred.....
Whooping cough	yes / no	If yes date occurred.....
Meningitis	yes / no	If yes date occurred.....



CONSENT FORM-PART 2

I hereby give my consent for my child to be taken on a local visit where transport is not necessary. eg local shops or parks.

Parent signature.....

Occasionally children are photographed for local press events or by students to be part of their course work; I hereby give my consent for my child to be included in these photos.

Parent signature.....

My child has previously been administered Calpol and would allow staff to administer if my child develops a temperature (please circle) Yes No

Parent signature.....

Sometimes at nursery a child may fall and graze themselves, to protect from infection I hereby give my consent for a plaster to be applied.

Parent signature.....

Humpty Dumpty Nursery in not liable for any loss or damage to any item of clothing or Property bought onto the premises

NURSERY COPY



AGREEMENT BETWEEN NURSERY AND PARENTS

One copy of this agreement is to be kept by the parent and one by the Nursery.

Name of Child _____

Address _____

Tel No _____

Name of Parents _____

Name of Nursery *Humpty Dumpty Nursery*

Address *Bilton Infant School, Magnet Lane, Bilton, Rugby.*

Tel No. *01788 521038*

Fees are to be paid in advance

Fees will be charged in the event of absence and during school holidays. Nursery Fees are reviewed annually.

Please Note: *The nursery cannot look after sick children, therefore if your child is ill, please keep him/her at home.*

Date the agreement is to begin _____

PARENT COPY



AGREEMENT BETWEEN NURSERY AND PARENTS

One copy of this agreement is to be kept by the parent and one by the Nursery.

Name of Child _____

Address _____

Tel No _____

Name of Parents _____

Name of Nursery *Humpty Dumpty Nursery*

Address *Bilton Infant School, Magnet Lane, Bilton, Rugby.*

Tel No. *01788 521038*

Fee are to be paid in advance

Fees will be charged in the event of absence and during school holidays. Nursery Fees are reviewed annually.

Please Note: The nursery cannot look after sick children, therefore if your child is ill, please keep him/her at home.

Date the agreement is to begin _____

Terms of Agreement- Nursery Copy

Please read the following terms and conditions carefully and sign below to say you're in agreement of these. Copy of this agreement will be kept by the nursery and parents.

1. I must give a 4 week notice if I am to take my child out of nursery.
2. If bills are unpaid and management feel that unpaid fees are escalating to an unsatisfactory amount, nursery management are in their right to terminate your contract at Humpty Dumpty Nursery. If you're having difficulty to pay your nursery fees for financial reasons please speak to management to arrange a suitable payment plan. We have a Dept Management policy which procedure will be followed. If you require a copy of this policy see a member of staff.
3. If your child is in receipt of the 2 HELP Funding there is no funding over holiday periods, if you require your child to attend nursery, then half fees will be charged.
4. If your child is in receipt of the 3 and 4 year old Universal Funding or 30 Hours funding there is NO funding during holiday periods and charges will be as follows.

Here is an example.

	Monday	Tuesday	Wednesday	Thursday	Friday
Sessions	8.30 - 3.30		8.30 -3.30	8.30 - 12.45	
Not in	£12.50		£12.50	£13.50	
Come in	£20.00		£20.00	£12.50	

If your child attends nursery during the holidays, as a good will gesture we will charge half our original session fee. If your child does not attend their sessions then additional service fee will be charged to secure your child's place over the holiday period.

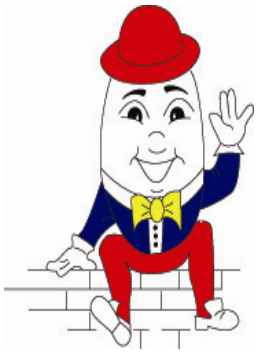
5. We agree to the policies and procedures of the nursery. Policies are available to read in nursery and a copy maybe be requested.
6. We accept that fees will be reviewed annually and subject to increase. A letter of notice will be sent out within 8 weeks of changes.
7. We accept that you can add extra sessions but are aware that we will be unable to swap sessions.

The information you supply will be kept in a secure manner and only used appropriately in communications to conform to regulations. Information you supply should be kept up-to-date. It is your responsibility to inform us of any up-dated information.

I have read and adhere to the above terms and conditions of Humpty Dumpty Nursery.

Parent Signature _____ Date _____

Nursery Management Signature _____ Date _____



Terms of Agreement- Parent Copy

Please read the following terms and conditions carefully and sign below to say you're in agreement of these. Copy of this agreement will be kept by the nursery and parents.

1. I must give a 4 week notice if I am to take my child out of nursery.
2. If bills are unpaid and management feel that unpaid fees are escalating to an unsatisfactory amount, nursery management are in their right to terminate your contract at Humpty Dumpty Nursery. If you're having difficulty to pay your nursery fees for financial reasons please speak to management to arrange a suitable payment plan. We have a Debt Management policy which procedure will be followed. If you require a copy of this policy see a member of staff.
3. If your child is in receipt of the 2 HELP Funding there is no funding over holiday periods. If you require your child to attend nursery, then half fees will be charged.
4. If your child is in receipt of the 3 and 4 year old Nursery Education Funding (NEF) there is NO funding during holiday periods and charges will be as follows.

Here is an example.

	Monday	Tuesday	Wednesday	Thursday	Friday
Sessions	8.30 - 3.30		8.30 -3.30	8.30 - 12.45	
Not in	£12.50		£12.50	£13.50	
Come in	£20.00		£20.00	£12.50	

If your child attends nursery during the holidays, as a good will gesture we will charge half our original session fee, if your child does not attend their sessions then additional service fee will be charged to secure your child's place over the holiday period.

5. We agree to the policies and procedures of the nursery. Policies are available to read in nursery and a copy maybe be requested.
6. We accept that fees will be reviewed annually and subject to increase. A letter of notice will be sent out within 8 weeks of changes.
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I have read and adhere to the above terms and conditions of Humpty Dumpty Nursery.

Parent Signature _____ Date _____

Nursery Management Signature _____ Date _____



Dear Parents,

You child's early years setting is currently implementing the 'time to talk'TM strategy - a joint NHS and Warwickshire County Council project.

The project aims to ensure that all children have every opportunity to achieve their potential in speech, language and communication.

As part of this project, settings are trained in using a screening tool called the **WellComm**. This involves the practitioner completing fun activities individually with a child to identify their level of communication development, and then planning activities to help them to continue to progress.

In order to use this screening tool, your setting must have parental permission. This is because the screening activities are different to what would normally happen in every day practice.

It is essential that parents are involved in supporting their children develop strong communication skills. Practitioners will provide you with feedback on how to help your child move forward, once the screening is complete.

If you are happy for the setting to use the WellComm screening with your child please complete the box below:

Child's name: _____	Date: _____
Parent/guardian's name: _____	
Parent/Guardian's Signature: _____	

In order to make sure the 'time to talk'TM project is having a direct impact on the communication skills of children across Warwickshire, we regularly collate and analyse the WellComm data from settings across the county. The entire data collected using WellComm is anonymous and may be shared with other professionals within Speech and Language Therapy and Early Years.

Please tick this box if you **DO NOT** want your child's screening information to be included

Thank you