Busy Fingers

**Main Street, Little Downham, Ely CB6 2ST**

**01353 698633, busyfingerspreschool@gmail.com**

**www.busyfingers-preschool.co.uk**

**REGISTRATION FORM**

Basic Details

|  |  |
| --- | --- |
| Full Legal Name of Child |  |
| Date of Birth |  |
| Name child is known as |  |

Parent/s or carers with whom the child lives with and who has parental responsibility

|  |  |
| --- | --- |
| Names |  |
| Address including postcode |  |
| Home telephone |  |
| Mobile numbers |  |

Do you require a home visit? Yes No

Name of any other adult who lives with the child who does not have parental responsibility.

|  |
| --- |
|  |

Name of any parent with whom the child does not live.

|  |
| --- |
|  |

Does this parent have parental responsibility? YES/NO

Does this parent have legal access? YES/NO

|  |  |
| --- | --- |
| Address of this parent |  |
| Telephone numbers for this parent |  |

**Emergency Contact Details**

Parent/carer 1

|  |  |
| --- | --- |
| Name |  |
| Telephone numbers |  |

Parent/carer 2

|  |  |
| --- | --- |
| Name |  |
| Telephone numbers |  |

Other emergency contacts

**I confirm I have consent from these individuals to pass their phone number on to you, solely for the purpose of being an emergency contact for my child.**

|  |  |
| --- | --- |
| Name and relationship to child |  |
| Telephone numbers |  |

|  |  |
| --- | --- |
| Name and relationship to child |  |
| Telephone numbers |  |

Other persons authorised to collect your child (must be over 16 years of age)

|  |  |
| --- | --- |
| Name and relationship to child |  |
| Telephone numbers |  |

|  |  |
| --- | --- |
| Name and relationship to child |  |
| Telephone numbers |  |

**Personal Details of your child**

Does your child have any special dietary needs? YES/NO

If YES please give details

|  |
| --- |
|  |

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

|  |
| --- |
|  |

What is the main religion of your family?

|  |
| --- |
|  |

What language/s is/are spoken at home?

|  |
| --- |
|  |

Any distinguishing marks on your child (e.g. birthmarks)? YES/NO

If YES, please give details

|  |
| --- |
|  |

**Medical Details of your child**

Does your child suffer from any of the following allergies? Please indicate if so;

eggs, soya, milk, celery, mustard, sesame, cereals containing gluten.

Do they suffer from any other allergies? YES/NO

If YES to any of the above, please give details; what their allergy is to, how long have they suffered from it, how they react to contact with it, what treatment is required

|  |
| --- |
|  |

Details of any previous or recurring medical condition and its history

|  |
| --- |
|  |

Was your child born prematurely? YES/NO

If YES, please give details (weeks, weight etc

|  |
| --- |
|  |

Does your child have any special needs or disability? YES/NO

If YES please give details

|  |
| --- |
|  |

What special support will your child need in our setting?

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Doctors Name |  |
| Telephone Number |  |
| Surgery |  |

Name of any other professionals involved with your child

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Role | Agency | Telephone number |

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Role | Agency | Telephone number |

Do you have a Health Visitor? YES/NO

If Yes,

|  |  |  |
| --- | --- | --- |
| Name | Telephone number | Based at: |

Does your family have a Social Worker? YES/NO

If Yes,

|  |  |  |
| --- | --- | --- |
| Name | Telephone number | Based at: |

What is the reason for the involvement of social services with your family?

|  |
| --- |
|  |

Is there an EHA (Early Health Assessment) already in place? YES/NO

**Other Settings**

Please give details below of any other settings that your child attends (nursery/childminder etc.)

|  |  |  |
| --- | --- | --- |
| Name | Telephone number | Email address |

Please indicate below whether Busy Fingers Pre-school can get in touch with your child’s other setting for the purpose of sharing information on your child’s development and learning.

|  |  |
| --- | --- |
| Yes, I am happy for you to get in touch | No, I do not wish for information to be shared |

Receiving information from the pre-school

Unless you state otherwise, to reduce paper usage we will send as much information to you as possible via email

|  |  |
| --- | --- |
| Parent email address |  |
| Parent email address |  |
| Carer email address |  |

I would prefer a paper copy YES/NO

**TERMS OF ENROLMENT**

A non-refundable fee of £25.00 is payable with each enrolment for those children of non-Nursery Education Funded age.

Each half term, once you have booked sessions for your child, you will be responsible for the payment of those session fees in full. Full fees are payable in respect of a child being unable to attend due to illness or holidays. At the end of each half term all fees must be paid in full. Failure to do so may result in losing your child’s place. **Cancellation of a place needs to be made a half term in advance to avoid being invoiced for further sessions.**

If you do not collect your child from the pre-school by 12.10pm for the morning session and 3.10pm for the afternoon session your emergency contact will be called to collect your child on your behalf. The pre-school operates an additional charges scheme for late collections.

5 – 15 mins = £ 5.00 30 – 45 mins = £15.00

15 – 30 mins = £10.00 45 – 50 mins = £20.00

In the event of neither contact number being reached, the pre-school staff are obliged to contact social services, or the police department. Two members of staff will remain with your child until collection. If you are going to be late collecting your child, the pre-school staff must be informed. After any event the incident will be logged and parents required to sign.

You must inform us of any changes to the details supplied on this form.

We have a full Privacy Statement regarding the types of information we collect and why we need it. Busy Fingers Pre-School will share information regarding a child’s progress relating to the Early Years Foundation Stage with the next provider of a child’s education as a matter of course.

**AGREEMENT**

I have read the terms of enrolment as set out above and agree to be bound by these terms. I also give permission for my child:

• To be taken out of the pre-school on visits to the park, village shop or other places of interest in the village. (Staff ratio levels will be maintained, extra assistance will be sought, risk assessments will be carried out and prior notice of any such outing will be given.)

• To receive urgent medical attention. Staff may carry out emergency procedures, if the pre-school are unable to contact me. I give permission for a paramedic or other qualified professional to carry out any required treatment for my child.

• I understand that my child will be observed, monitored and records will be kept strictly confidential. I may make an appointment to view these records if I wish.

• I understand that photographs may be taken of my child during their pre-school sessions. These may be used to support learning and development or publicity purposes (Please see attached consent form).

• I understand that, if appropriate, Busy Fingers Pre-school will adapt the sessions my child attends to meet their individual needs.

**PROOF OF MY CHILD’S DATE OF BIRTH HAS BEEN PROVIDED VIA;**

|  |  |  |
| --- | --- | --- |
| **Passport** | **Birth certificate** | **Other** |

**Parent’s wishing to take their own photographs and videos**

I agree to ensure that all images I take at Busy Fingers Pre-school or on outings with the Pre-school will be for my personal use only; they will be kept securely and used appropriately.

I agree not to distract or obscure the view of others whilst taking images.

I will only post photos or videos on to social media if I have written consent from all children featured in the photo.

**GDPR and Safeguarding Consent**

Please read and refer to the Busy Fingers Privacy Statement with regards to how we collect and store personal information. It is an Ofsted and an Early Years Foundation Stage Statutory Framework requirement for us to hold certain information. We also hold data on behalf of the local authority such as funding forms. There are other things we need consent for. Please initial each statement below to either opt in or opt out of each statement.

|  |  |  |
| --- | --- | --- |
|  | Opt in | Opt out |
| I agree for my child’s first name to be displayed around the setting. |  |  |
| I agree for my child’s photo to be displayed around the setting. |  |  |
| I agree for photos to be used in my child’s learning journal. |  |  |
| I agree for photos of my child to be used in another child’s learning journal. |  |  |
| I agree for my child’s first name to appear in another child’s learning journal. |  |  |
| I agree for my child’s photo to appear on the Busy Fingers website. |  |  |
| I agree for my child’s photo to appear on printed advertisement. |  |  |
| I agree for my child’s first name to appear in newspaper articles and social media articles. (Such as Spotted in Ely on Facebook). |  |  |
| I agree for my child’s photo to appear in newspaper articles and social media articles. (Such as Spotted in Ely on Facebook). |  |  |
| I agree for my child’s photo to appear on the parent/carer private Facebook page. |  |  |
| I agree for my child’s photo to appear on the public Busy Fingers Facebook page. |  |  |
| I am happy for you to hold information regarding my family’s race, ethnic origin and religious or philosophical beliefs. |  |  |
| I am happy for Busy Fingers to share relevant information with health visitors, other childcare settings, doctors and emergency services and other agencies such as Speech and Language Therapists and Specialist Teachers. |  |  |

You have the right to withdraw this consent regarding data at any time.

|  |  |  |
| --- | --- | --- |
| Parent/carer name: | Parent/carer signature: | Date: |

Busy Fingers

Tapestry Online Learning Journal Permission Slip

Child’s Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please read carefully before signing.

• I give permission for an online Tapestry Learning Journal to be created and maintained for my child.

• I give permission for staff at Busy Fingers Preschool to take photographs and videos of my child to be used in their online Learning Journal.

• I give permission for my child to appear in any group photos used in the Learning Journal. I understand that my child’s image will be viewable by all parents/ carers of the pupils featured in that particular photo.

• I agree not to electronically share, by social media or other platforms, any part of my child’s Learning Journal (including photographs and videos). I understand that my child’s Learning Journal is to be used for my own personal use (meaning that information cannot be shared with others, or published in any way without the explicit written consent of the parents or carers of those children who may be included.)

• I agree to keep my login details safe and secure.

Please add all the names and email addresses of the people who will have access to the online learning journal. This can be both parents and also carers who may be able to add to your child’s learning journal. (Such as a childminder.)

|  |  |
| --- | --- |
| Full Name: | Email: |
| Date: | Signature: |
| Full Name: | Email: |
| Date: | Signature: |
| Full Name: | Email: |
| Date: | Email: |