

Date form received by Pre-School:



4.3 Registration Form

Name of child _____ D.O.B _____

Gender (Male or Female) _____

What name do you wish your child to be called at Pre-School (Sue, Susan, Susie etc....) _____

Name of Parent/s with whom the child lives (parent 1) _____

Does this parent have parental responsibility? Yes/No Occupation _____

(parent 2) _____

Does this parent have parental responsibility? Yes/No Occupation _____

Address _____

_____ Postcode _____

Primary email address for contact _____

Telephone _____ Mobile _____

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

Does this parent have parental responsibility? Yes/No Occupation _____

Address _____ Postcode _____

Does this parent have legal access to the child? Yes/No

Emergency Contact Details

Parent 1 – work/daytime number _____

Parent 2 – work/daytime number _____

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Name of any other contact _____ number _____

I confirm that I/we are happy to be contacted on any of the above details Yes/No

I confirm that I give consent for my information on this form to be held in line with Codicote Pre-School's Data Protection & Privacy Policy Yes/No

Please give details below of any other persons authorised to collect your child (must be over 16 years of age)

Does your child have any allergies? Yes/No If Yes, give details below.

Does your child have any special dietary needs or preferences? Yes/No If Yes, give details below.

Is your child on any regular medication? Yes/No If Yes, give details below.

Is your child attending, or has previously attended, another setting – if so, please give dates and details below.

What is your child's NHS number – this must be entered here.

Do you agree to us claiming gift aid on any fundraising donations made to Pre-School Y/N

What is the main religion in your family? _____

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What language/languages are spoken at home? _____

If English is not the main language spoken at home, will this be your child's first experience of being in an English-speaking environment? Yes/No.

Do you consent for your child to be taken to hospital in an emergency? Yes/No

Can staff administer simple first aid to your child if needed? Yes/No

Can staff apply a plaster if required? Yes/No

Do you consent to your child accompanying staff on short walks in the Pre-School grounds? Yes/No

Do you consent to photos of your child being displayed in the setting and used for publicity posters to advertise open day etc.... Yes/No (a separate form applies to our website and Facebook page)

Do you consent to staff writing observations of your child and gathering information to support their needs whilst at the Pre-School. These will be put in their learning journals and shared with you at regular intervals. Yes/No

Do you consent for staff to share your contact details with Tenterfield Children's Centre? Yes/No

Special Educational Needs & Disabilities

Was your child born prematurely? Y/N If so, please state how many weeks early.....

Does your child have any special needs or disabilities? Yes/No If yes, give details below and details of any support that will be needed at Pre-School.

Are any of the following in place for your child or are you in the process of getting....?

SEN support [] Education/health care plan []

Are you in receipt of/in then process of Exceptional Needs Funding (ENF)? []

Name of professionals involved with your child. (Speech & Language Therapist/Advisory teacher/paediatrician/physiotherapist etc.....

Name 1 _____ Agency _____

Role _____ Contact details _____

Name 2 _____ Agency _____

Role _____ Contact details _____

Do you have a health visitor? Yes/No

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Name _____ Based at: _____

Contact details _____

Does your family have a social care worker for any reason? Yes/No If yes, please give the reason and their details below.

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Equalities monitoring form (Please complete)

White – British

- Irish
- Traveller of Irish Heritage
- Gypsy/Roma
- Any other white background

Mixed – White and Black Caribbean

- White and Black African
- White and Asian
- Any other mixed background

Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

Black or Black British

- Caribbean
- African
- Any other Black background

Chinese

- Chinese

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Any other ethnic background

- Please state _____

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