APPLICATION TO JOIN – 2-4 YEAR OLDS

I/we would like ……to start at Codicote Pre-School.

Date of birth:……/……/……

Current school/nursery/childcare:……

Name and address Parent/carer/guardian making application:

Name:……Relationship:……

Address:……

Landline:……Mobile:……

Email:……

Name:……Relationship:……

Address:……

Land-line:……Mobile:……

Email:……

I/we would like them to start: As soon as possible/from……

How many sessions would you like to start with? (We require a minimum of 2 sessions per week)……

If we no longer need the place, we will inform the setting as soon as possible.

I/we have read, understood and agree to abide by the settings policies and procedures. (Copies can be viewed on the website or copies can be emailed to you on request).

Signatures:……Date:……

Your child will need to have a visit to the setting before their start date.
This will be arranged between you and the office once the paperwork is completed.

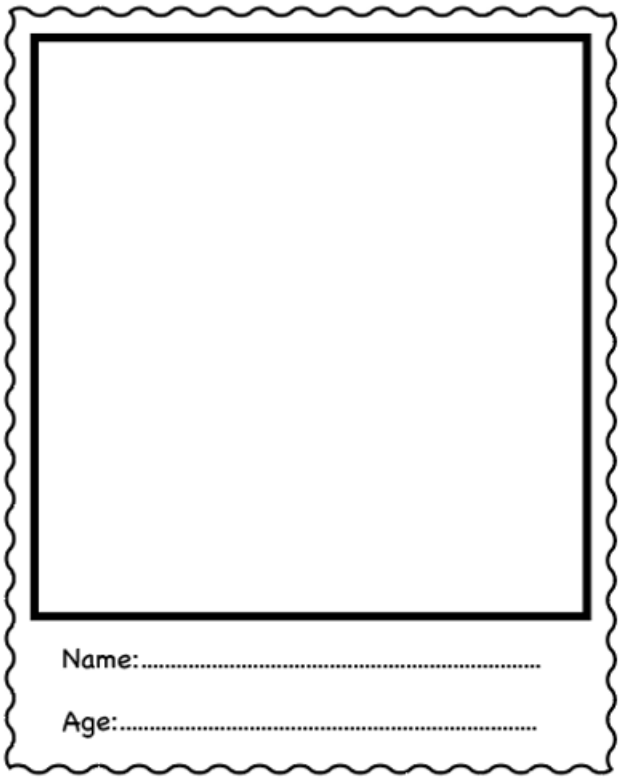
Please tell us about your child. This helps us to prepare for their induction and also helps their key-worker to get to know them.

My favourite nursery rhyme, song or story is…

My special people are…

Does anything frighten you or is there anything you really don't like?

Can you speak/understand another language?



Name:.....

Age:.....

Do you have any pets or a favourite animal?

My favourite thing to do at home is…

My favourite toy/comfort object is…

My favourite snack is…

Do you go on days out or holidays? If so, where?

Do you go to any clubs?

Do you live in a house/flat/bungalow/ caravan?

My favourite film/TV program and/or character is…

Do you have any special friends?

My favourite colour is…

BACKGROUND INFO

PEOPLE AROUND YOUR CHILD

Full name of your child:.....

What name do you wish your child to be called at Pre-School?

……..

Gender:……

NAME OF PARENTS/CARERS WITH WHOM THE CHILD LIVES:

(Parent/Carer 1)……..Occupation……

(Parent/Carer 2)……..Occupation……

Which parent has parental responsibility? Parent 1/Parent 2/both

Primary email address for contact:.....

Telephone:.....Mobile:.....

Address:.....

.....Postcode:.....

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

Do they have parental responsibility? Yes/No Occupation:.....

Email address:.....

Telephone:.....Mobile:.....

Address:.....

.....Postcode:.....

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

If no, please supply a copy of the court order that prevents them from having access to the child.

Name of any other contact:.....

Relationship:.....Number:.....

I can confirm that contact can be made to any of the people mentioned: **Yes/No**

EMERGENCY CONTACT DETAILS

Parent 1 - Work/daytime number:.....

Parent 2 - Work/daytime number:.....

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

Please give details below of any other person authorised to collect your child

(NB. They must be over 16 years of age)

Person A:.....

Relationship:.....Number:.....

Person B:.....

Relationship:.....Number:.....

PREVIOUS EDUCATION

Is your child attending, or has previously attended, another setting? Yes/No

If yes, please give dates and details below:

Childcare provider:.....

How long/often attended:.....

RELIGION

What is the main religion of your family?.....

As a family we celebrate/would like my child to learn about:.....

.....

LANGUAGE

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**

If so, please write down common phrases that we can learn in your child's first language here:

……..

……..

……

……

……

……

……

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……

……

Please give examples, such as 'Mummy', 'Daddy', 'yes', 'no', 'eat', 'drink', 'sleep', 'Mummy/Daddy will be back soon', 'Let's play' etc.

It would be helpful if you could also write it phonetically to assist us with pronunciation. Thank you!

SPECIAL EDUCATIONAL NEEDS AND DISABILITIES (SEND)

We try to take into account any additional needs which a child may have. It is important to us that all children feel cherished in our care and treated equally. Below are a few questions that can help us define how we might better assist or adjust our planning to accommodate your child if necessary.

Was your child born prematurely? **Yes/No**

If so, please state how many weeks early:.....

Does your child have any special needs or disabilities? **Yes/No**

If yes, please outline those additional needs/disabilities below and give details of any support required at Pre-School:

.....

.....

.....

.....

.....

.....

Do you consider your child to be/have a disability? If yes, please provide details.

.....

.....

.....

.....

Are any of the following in place for your child or is in the process of getting?

SEN Support? **Yes/No/Pending** Educational Plan? **Yes/No/Pending**

Are you in receipt of/in the process of Exceptional Needs Funding (EFN)? **Yes/No**

Do you have a Health Visitor? **Yes/No**

Name:……Based at:……

Contact details:……

Does your family have a Social Worker for any reason? **Yes/No**

If yes, please give reasons and details:……

……

……

……

……

(Find out more about the 'Local Offer' at www.directory.hertfordshire.gov.uk)

Name of professionals involved with your child (speech and language therapist, Advisory teacher, paediatrician, physiotherapist etc.)

Professional 1:……Agency:……

Role:……Contact Details:……

……

Professional 2:……Agency:……

Role:……Contact Details:……

……

Professional 3:……Agency:……

Role:……Contact Details:……

……

EQUALITIES MONITORING FORM (OPTIONAL)

White - British
- Irish
- Traveller of Irish Heritage
- Gypsy/Roma
- Any other white background (please state)……

Mixed - White and Black Caribbean
- White and Black African
- White and Asian
- Any other mixed background (please state)……..

Asian or Asian British
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background (please state)……

Black or Black British
- Caribbean
- African
- Any other Black background (please state)……

Chinese

Any other ethnic background (please state)……

SNACK

We follow a healthy eating policy offering fruit and veg options as our snacks. If you have any suggestions, especially if you have any awareness of dietary issues, please state below. Milk is offered to the children at snack time. For those who are dairy intolerant, there is also water. Children can be sat at a separate table if needed. Please notify us if this is the case. We ask that no nuts are brought in!

Some of the snacks we offer:

Apple slices	Red Peppers	Strawberries	Pear	Pineapple
Sliced grapes	Melon	Cucumber	Banana	Houmous
Clementine	Watermelon			

Suggested snack:……

……

Brand/where it can be purchased:……

……

Does your child have any dairy intolerant/food/drink they need to avoid:……

……

……

ALLERGIES

To help us keep all children safe, it is imperative we know about any allergies/dietary sensitivities/requirements. It is also useful to know of any situations that may cause problems, such as contact with animals/certain materials such as latex.

Please state any know allergies:……

Please state any material/item that needs to be avoided:……

……

CLOTHING

We ask that you provide a named bag (not drawstring) with spare clothing/underwear (nappies and wipes if appropriate). We do have limited spares just in case.

We love to go outside as much as possible so it is important that your child has appropriate clothing for the weather; sun hats, scarf, gloves and warm coat etc.

Your children will get messy (this is an important part of growing up) so please don't put them in their best outfits! We do have puddle suits, but accidents happen!

Branded Pre-School tops are available to buy for £5 each. They're not compulsory. All profits made from the purchase of these go straight back into the Pre-School.

NAME LABELS

You can help us raise money and easily label your child's clothes by ordering from http://www.mynametags.com and using the **school ID 96931**. 20% of your total will be matched and sent to the Pre-School at no extra cost to yourselves!

BRANDED T-SHIRT ORDER FORM

Child's name:.....Date:.....

Quantity:.....Size 1-2 / 3-4/ 5-6

Paid by: Cash/Bank transfer (reference transaction: top child's surname)

Our bank details: Acc: 20163324 Sort: 20-92-54

GDPR CONSENT

With the introduction of the General Data Protection Regulations (GDPR 2018), Codicote Pre-School needs your consent if we are to continue some of our communications with you. We use emails to inform of adverse weather closures, sickness, special events. Please consider the options below and tell us how you would like the Pre-School to act.

GDPR CONSENT

I would like to be informed of future events and other news from Codicote

Pre-School and consent to the Manager/Administrator holding and processing

my personal data for this purpose. **Yes/No**

I would like to be contacted in any one of the following ways (*please only complete the option(s) for the format that you are happy to be contacted regarding future events and news*):

Postal Address:.....

Tel (Mobile):.....

Tel (Home):.....

Email Address:.....

Signed:.....Date:.....

You can find out more about how we use your data from our 'Privacy Notice' which is available from our website. You can change or withdraw your consent at any time by contacting the office - codicotepreschooloffice@gmail.com

PLEASE NOTE: If you do not complete and return this form, you may miss out on future news items from Codicote Pre-School.

TAPESTRY PERMISSION

I give permission for Codicote Pre-School to create an online Tapestry Learning

Journal for……Date of birth:……|……|……

The email address I would like to use to link with the account to have access to my child's Learning Journal is:

Your email:……

Additional name:……Relationship:……

Additional email:……

If you do not have access to email, please let us know and you will be able to view your child's Learning Journal using Pre-School equipment by appointment.

I agree to uphold the Pre-Schools request not to share or upload any photographs showing other children **Yes/No**

I agree to keep my login details secure **Yes/No**

I agree to my child's key person working on their Learning Journal at home and in line with the setting policies **Yes/No**

Full Name:……

Signature:……Date:……

GIFT AID

Gift aid is reclaimed by the charity from the tax you pay for the current tax year. Your address is needed to identify you as a current UK taxpayer. You can boost your donation by 25p of Gift Aid for every £1 you donate.

We currently do not regularly use Gift Aid but, on occasion, we do for charity events.

Please fill in this form below:

GIFT AID – CODICOTE PRE-SCHOOL - CHARITY NUMBER: 2772607

Please treat as Gift Aid donations all qualifying gifts of money made:

◇ Today ◇ In the past 4 years ◇ In the future

I am a UK taxpayer and understand that if I pay less income tax and/or capital gains tax than the amount of Gift Aid claimed on all my donations in that tax year, it is my responsibility to pay any difference.

Title:..... First Name:.....Surname:.....

Address:.....

.....Postcode:.....

Signature:.....Date:.....

PLEASE NOTIFY US IF YOU:

1. Want to cancel this declaration

2. Change your name or home address

3. No longer pay sufficient tax on your income and/or capital gains.

If you pay income tax at the higher/additional rate and want to receive the additional tax relief due to you must include all your Gift Aid donations on your self-assessment tax return or ask HMRC Please ask Revenue and Customs to adjust your tax code accordingly.

PERMISSIONS

MEDICAL PERMISSION

What is your child's NHS number:.....

Does your child have any other medical issues that we need to know about?

.....

.....

Does your child currently have medication/s?

.....

.....

If yes, do they require these to be stored on site? **Yes/No**

If yes, please provide details of dosage etc./when to administer:

.....

.....

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

Do you consent to staff administering simple first aid to your child if necessary? **Yes/No**

Do you consent to staff administering over the counter medications to your child if necessary? (such a Calpol/Nurofen)? **Yes/No**

Do you consent to staff administering medication prescribed by a medical professional to your child, if necessary? **Yes/No**

Do you consent to staff applying a plaster on your child, if required? **Yes/No**

Do you consent to staff applying sun cream on your child, if required? **Yes/No**

I confirm I am happy for Codicote Pre-School to administer medications/cream/plasters as detailed above where I have selected '**yes**'.

I will inform my child's key worker if I have given any medication to my child in the previous 12 hours, including details of the name of the medication, the dosage and the time administered.

I will provide any information/arrange training to Codicote Pre-School to assist them with administering medications safely:

Full Name:.....

Signature:.....Date:.....

Any medication given will be logged with the time, date and dosage and shared with parents.

OTHER PERMISSIONS

I consent to my child accompanying staff on short walks in the school grounds. **Yes/No**

I consent to my child accompanying staff on off-site outings. **Yes/No**

I consent to my child being driven in the Pre-School vehicle (with appropriate child restraints). **Yes/No**

I consent to photos of my child being displayed in the setting. **Yes/No**

I consent to photos of my child being used on publicity posters/leaflets to advertise open days etc. **Yes/No**

I consent to photos of my child being included in the Codicote Parish Magazine. **Yes/No**

I consent to photos of my child being used for other purposes such as appearing in the local newspaper (including the newspaper's website). **Yes/No**

I consent to photos of my child appearing on our website (no children's names or personal information will be posted). **Yes/No**

I consent to photos of my child appearing on our Facebook page (no children's names or personal information will be posted). **Yes/No**

I consent to my child's photo being used by the Pre-School for the above (agreed) purposes after they have left the Pre-School. **Yes/No**

I consent to staff writing observations on my child and gathering information/photos to support their needs whilst at Pre-School? If yes, these will be put on Tapestry and shared with you at regular intervals. **Yes/No**

I consent to the Pre-School to share my contact details with the Hertfordshire Family Centre Service.. **Yes/No**

I agree that I will not use a mobile phone, smart watch or any other recording device whilst on the Pre-School premises.

Full Name:.....

Signature:.....Date:.....

TERMS AND CONDITIONS

These terms and conditions form part of your contract with Codicote Childcare and Pre-School and are legally binding. By sending your child to our provision, you will be deemed to have accepted the following terms and conditions.

Child's legal name(s):..... Child's legal surname:.....

Address and postcode: .....

.....Date of birth: .....

- To register your child for Codicote Pre-School you must complete in an 'Application to Join Form'.
- Fees for children aged 9-23 months are charged hourly at a rate of £11.45/hour.
- Session fees for children aged 2-4 based up at the Pre-School are charged at £20.50/session or £41.00/full day.
- Session fees for children aged 3-4 based at Codicote Primary School are charged at £24.00/session or (for those who are using funding), £5.00 for the additional time over the funded hours or a £2.00 consumables fee (for those who are using stretched funding to cover 14:55-15:20).
- Fees must be paid by the date specified on the invoice or agreed payment plan.
- Fees must still be paid if a child is off sick, takes holiday or the setting has to close in case of an emergency.
- Half a term's notice must be given in writing for any reduction in the number of sessions or if your child will be leaving preschool.
- Fees for that half-termly notice will apply, regardless of attendance.
- Codicote Pre-School must be in receipt of fees owed for your child to attend sessions.
- The fees are annually reviewed by the committee.
- Bank transfer/Childcare vouchers / Government childcare scheme are accepted for payment of fees.
- To receive funding, you must return a fully completed Local Authority Funding Form and provide a valid eligibility code by the 1st of the month preceding the term(s) that you wish to claim funding. For example, for the term beginning January 2026, you must return the form and eligibility code by 1st December 2025.

- You are responsible for the payment of any fees if (for whatever reason) the Local Authority does not pay your child's funding.
- If you are paying via Childcare Vouchers or Tax-Free Childcare, you are responsible for the prompt payment of any fees if payment is not made on time by these schemes.
- If you are paying via Childcare Vouchers or Tax-Free Childcare, you agree to begin the payment process three working days before our invoice payment date (or the written agreed payment date) to ensure that we are paid on time.
- We reserve the right to charge late fees (as outlined in our 'Late Fees Schedule') if fees are not paid (for whatever reason) by the invoice due date or the written agreed payment plan.
- We reserve the right to suspend your child's place (without notice) if fees are not paid by the invoice due date or by the written agreed payment plan
- We reserve the right to withdraw your child's place (without notice) if fees are not paid by the invoice due date or by the written agreed payment plan.
- We reserve the right to suspend your child's place (without notice) if, in our opinion, the behaviour or words of either the child or their carer causes offence to others or presents a safeguarding risk to others.
- We reserve the right to suspend your child's place (without notice) if, in our opinion, the behaviour or words of either the child or their carer causes offence to others or presents a safeguarding risk to others.
- In the case(s) of suspension or withdrawal of a placement, outstanding fees are still payable.
- In order to help your child settle and to get used to our routine, we require the child to be signed up to a minimum of 2 sessions per week.

ADDITIONAL TERMS AND CONDITIONS (CODICOTE SCHOOL SITE)

AS WELL AS THE ABOVE TERMS AND CONDITIONS, THE FOLLOWING TERMS AND CONDITIONS RELATE TO ALL THOSE WITH CHILDREN WHO ATTEND OUR WRAPAROUND NURSERY PROVISION ON THE SITE OF CODICOTE SCHOOL.

- Places for our provision on the site of Codicote Primary School will only be allocated to those children who are registered as attending the morning nursery class at Codicote Primary School.
- By accepting a place at our afternoon provision on the site of Codicote School, you agree:
  (1) That your child will stay for the full session between 11:55-15:20, except for occasional exceptional circumstances as agreed in writing with the Room Leader, Pre-School Leader or Deputy Leader.
  (2) To pay for the additional fee(s) for the time charged between 14:55-15:20 (paying in the usual way as set out in the above terms and conditions).
  (3) To arrive on the site of Codicote Primary School *no earlier* than 15:10 on the day(s) that your child is attending our afternoon provision on the school site.
  (4) To ***not*** allow your child to play with any of the school's equipment once you have collected your child from our wrap around nursery provision.
- You understand that the wrap around nursery provision on the site of Codicote School is wholly run and managed by Codicote Pre-School (not Codicote Primary School).
- Any comments or queries relating to the wrap around nursery provision on the site of Codicote School should be directed to the Pre-School Leader or Deputy Leader (and not the school office).
- You agree to abide by the rules and regulations of Codicote Primary School whilst on their site.
- You agree to abide by the Policies and Procedures of both Codicote Pre-School and Codicote Primary School.

AGREEMENT

I agree to the above terms and conditions.

Signed (parent/carer): .....

Print name:..... Date:……