



Registration form



Childs Name		Date of birth	
Address:			
Post Code:			
Name of parents/carers:			
1)			
TEL: Home:	Mobile	Work	
Email :			
Address ( if different from above)			
Name of parent /Carers			
2)			
Tel; Home	Mobile	Work:	
Email:			
Address (if different from above)			

Please tick the relevant boxes to indicate the sessions required.

	0900-1200pm	1200-300pm	900-300pm	Term time only
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				



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### Registration/child's personal record:

Childs Name		Date of birth	
Name to be used at Nursery		Male/Female	
Language spoken at home:			
Main language of child:	1)understands:	2)speaks	
Address:			
Postcode:			
Would you like to receive information about the nursery via email	Yes		No
Religion		Ethnicity:	
Are there any cultural or religious observances that you would like us to be aware of when looking after your child? For example ; dress, diet, religious holidays of festivals.			
Name/s of parents or carers' with whom your child lives:			
1)			
Tel: Mobile	Work	Email	
Does this parent have parental responsibility?	Yes		No
Name/s of parents or carers' with whom your child lives:			
2)			
Tel: Mobile	Work	Email	
Does this parent have parental responsibility?	Yes		No
Emergency Contact Details/ authorised to collect your child.			
1. Name	Relationship to child:	Password for collection:	
Tel:	Mobile:		
2. Name	Relationship to child:	Password for collection:	
Tel:	Mobile:	EMail:	



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We welcome all children irrespective of ethnicity, culture or religion, home language, family background, learning difficulties or disabilities, gender or ability. The following information will help ensure that your child has a smooth transition into our setting.

Health Information

Name of child's doctor			
Surgery Address		Tel:	
Name of Health Visitor:			
Tel:			
Please answer the following questions and give details:			
Does your child:			
Have any allergies?			
Have an epipen?			
Have any on-going health issues?			
Have a medical condition?			
Take any regular medication?			
Have or need a Health Care Plan?			
Has your child had any major illness, operation or a hospital stay?			
Are you concerned about any aspect of your child's health?			
Does your child have any special dietary requirements?			
Immunisations/Vaccinations			
Whooping Cough	Diphtheria	Tetanus	Polio
HIB Meningitis	Measles	Mumps	Rubella
Please inform us of any changes to health or personal information			



**Additional needs/information**

In which area/areas does your child have additional needs? Please tick the following and add any notes you think may be helpful to us.

Please tick		Name and address of contacts.
	Speech (for example: articulation)	
	Language (for example using or understanding language)	
	Emotional and or behavioural (for example separating/playing with other children?)	
	Hearing	
	Vision	
	Physical/movement (for example running, climbing stairs, using hands)	
	When were these needs first identified and by whom?	
	Does your child have or use any specialist equipment or resources? for examples~: glasses, hearing aids, Makaton, signing etc.....	

Does your child have any of the following ? (please tick)

	Individual Plan/ Individual Educational Plan	Statement of Educational need
	Application for a Statement of Educational need	CAF form (Common Assessment Framework form).

In order to best support all the children in our setting we have designated SENCO (Special Needs Co-ordinator) who will routinely liaise with any professionals involved with your child. The SENCO is: Annabelle Conway / Kerry Moore  
 We also have access to support and advice from our Area Special Needs Co-ordinator with whom we may discuss your child. **You will always** be informed beforehand of any contact or discussions held about your child.

Please sign below to indicate that your understand / agree to the above.

Signed:  
 Print:  
 Date:



**Contact Details**

Please tick	Please tick all professionals involved with your child:	Add their name, address and telephone number
	Health visitor	
	Social Worker	
	Speech Therapist	
	Paediatrician	
	Physiotherapist	
	Occupational Therapist	
	Educational Psychologist	
	Specialist Teacher	
	Area SENCO	
	Other	

**Information sharing consent form**

This form give permission for Jack In the Box Nursery to share relevant discussions, assessment, records, reports (which may include photographs) and information with other appropriate professionals (for example speech and language therapist, physiotherapist etc) working with your child, in order to provide support and aid transition into another nursery or school.

This will always be carried out in discussion with you.

I/We (parents/carers name).....  
 Give consent for Jack in the box Nursery to share relevant information about my/our child, with appropriate professionals.  
 Name of child.....  
 Date of birth.....  
 Parents/carers signature.....  
 Relationship to child.....  
 Date:.....  
 Signed:.....  
 Parents/carers signature.....  
 Relationship to child.....  
 Date:.....  
 Signed:.....



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Permission Details for Childs Name.....

I hereby GIVE/DO NOT GIVE permission for Jack In The Box staff to administer the recommended dose of paracetamol suspension to my child should he/she be in pain or have a high temperature whilst in their care. ( Applies to medicine that has been prescribed by a doctor for that child only and it must be clearly named). I will advise the staff, when dropping off my child, if I have already given my child any medication prior to arrival.

I hereby GIVE/DO NOT GIVE permission for photographs of my child to be taken and displayed in the nursery.

I hereby GIVE/DO NOT GIVE permission for my child to be taken off the Nursery premises with the correct adult/child ratio for such things as local walks and trips.

I hereby GIVE/DO NOT GIVE permission for Jack in the Box staff trained in first aid to give emergency first aid treatment should it be required. I understand that in the event of a medical emergency, care of the child will be transferred to medical personnel who will decide on appropriate emergency treatment. If I refuse this permission I will supply in writing the procedure I wish to be followed in the event of such an emergency. I understand that you will not be able to authorise any treatment and that I as the child's next of kin will be contacted by the medics in the event of an emergency to give permission, or in a life threatening situation the medics will act in their professional capacity.

I hereby GIVE/DO NOT GIVE permission for the staff at Jack in The Box to bath my child in the event of over soiling/sickness etc

I hereby GIVE/DO NOT GIVE permission to apply sun cream to my child in the event of hot sunny weather.

I hereby GIVE/DO NOT GIVE permission for Jack in the Box staff to apply a plaster to my child's skin.

I hereby GIVE/DO NOT GIVE permission for Jack in the Box staff to apply nappy cream to my child's skin if needed.

I hereby GIVE/DO NOT GIVE permission for Jack in the Box staff to apply teething gel to my child's gums, if provided by me.

I hereby GIVE/DO NOT GIVE permission for my child to have their face painted.

I hereby GIVE/DO NOT GIVE permission for a staff at Jack in The Box, when necessary to help my child clean themselves after using the toilet.

I hereby GIVE/DO NOT GIVE permission for my child's photo to be used on Jack In The Box materials, such as newsletters, brochures, website etc

I hereby GIVE/DO NOT GIVE permission Jack In The Box to store my details on their computer.

Parent/Carer name:.....Signature:.....  
Date.....



Childs Name: ..... Date: .....

## Terms and Conditions

### Bookings

A signed fully completed registration form must be received by Jack In The Box with a cheque equivalent of one months fee as a booking deposit to secure your child's place. **The deposit will be offset against your first month's fees.** Jack in the box will attempt to meet parent's individual needs where necessary.

**Fees and Payment** The first months payment is payable at the time of securing a place by cheque of payment into the bank account. Thereafter, payment is by direct debit or cheque on the first of each month, one calendar month in advance. Fees are calculated at a fixed monthly rate based on the child's booked and requested weekly sessions, i.e. price of weekly sessions x 52(weeks) / 12(months) = monthly invoice.

All Bank Holidays are subject to payment.

We are registered for the Nursery Education Grant for three and four year olds, these fees will be deducted off your monthly fees.

Temporary additional sessions/days must be paid for in advance and will not be refunded if cancelled.

All sessions booked must be paid for, regardless of whether the child attends. No refunds will be given for sessions missed for any reasons.

If you child is requiring a hot lunch this is paid for at the same time as your monthly bill. (only available at Morningthrope Nursery) We are not liable for collections from third parties, e.g. colleges, grant funding, voucher providers etc. The parents remain responsible for all outstanding fees.

Please also be aware that if you have received payments for assistance with nursery fees through the tax credits for periods which remain outstanding to us as a provider your details may be forwarded to a specialist unit and you may be asked to repay these and face a meeting under caution.

It is the parent's responsibility to cancel /amend standing orders.

Children must be collected on time, Parents who are late collecting a child will be charged £10.00 for every 15 minutes.

One calendar month notice will be given before any fee increase, closure of business or change in operation or services offered.

**Termination of child's place** We require one calendar months notice, **in writing**, should you wish to terminate your child's place for any reason. The months fees will be used as payment for the termination notice and no part payment for the month will be given. Parents remain liable for fees throughout the notice period. If a parent withdraws their child during the notice period, the fees remain payable in lieu of notice. We reserve the right to terminate a place with immediate effect if a parent, carer or child displays abusive, threatening or inappropriate behaviour of any kind, no refund will be given on this occasion.

**Change of Booked Days / Sessions** If a parent wishes to amend their child's days / sessions they must request this in writing providing one months written notice and complete the necessary form - 'Change of Days / Sessions'. (one off extra care arrangements are not affected).

### Belongings

Jack In The Box cannot be held responsible for the loss or damage to any items of children's property. We will make every reasonable effort to avoid any loss or damage to personal belongings. We strongly advise all parents to dress their children in practical inexpensive items of clothing, clearly labelled with their name and to leave toys, books etc at home unless they are of a strong comfort to the child when settling in. Uniform is available to protect home clothes.



### **Medication**

Prescribed medication will be administered by staff providing that a parent has completed and signed the 'Medication' form, indicating times and dosage of each course. All medication must be kept within their original bottles with the child's full name clearly marked on the label. No medication will be administered without prior authorisation from the parents and a fully completed medication form. Written consent must also be given for the application of creams and lotions. Jack In the Box will not be held responsible for any adverse reactions to any medication given. Please refer to our Medication Administration Policy for full details.

**Activities / Routines** Within their daily activities children follow a balance between a structured routine and an element of free choice, based around their areas of development. Jack in the Box uses a themed approach to plan activities taken from interest of the child, parents are regularly provided with evidence of their work. Activities are carefully planned to match the age range and ability of each child. The layout of each room is also based around their areas of development.

**Equal Opportunities** All children will be equally provided with an experience and opportunity, irrespective of race, gender, creed, religion or belief. Children develop an understanding that all people are equal, and any differences are to be enjoyed. All staff will be appointed on the grounds of qualifications, experience and suitability for the position.

**Dietary / Medical Requirements** Parents must inform Jack In The Box Nursery prior to their child attending of any special dietary or medical requirements. The nursery must also be informed in line with all allergies and any known cause of adverse reactions from: food, medication, activities etc. Parents must keep staff updated in line with any changes through written notification when they become aware.

**Accidents and Illness** Parents will be informed of all accidents and asked to sign an 'Accident / Incident Form'. In the event of a more serious accidents involving hospital treatment, Jack In the Box will make every attempt to contact the Parents. If unsuccessful then we will contact the person listed as emergency contact. Jack In The Box reserves the right to allow medical experts to act on behalf of the parents and authorise any necessary treatment should no successful contact be made. Jack In The Box will ensure that a member of staff always accompanies the child to the hospital and awaits the arrival of the parents or carers. We may require parents to collect their child from Jack In The Box in the event that the child appears unwell, or is, or has recently been suffering from any contagious disease / infection and there remains a danger of other children being at risk of contracting such diseases / infections. Children are not permitted back to Jack In The Box following an illness until they have passed the exclusion periods highlighted within our "Communicable Disease List". We accept no responsibility for any child contracting contagious diseases / infections during nursery hours. Parents are informed of all head injuries as a matter of course. If a child does not attend for two weeks without any contact from parents we will contact you to see if you still require the space.

**Behaviour and Sanctions** Jack In The Box aims to create a positive atmosphere where children learn what behaviour is acceptable. Jack In The Box policy is to try and encourage acceptable behaviour by rewarding it with praise and attention. Children will also be encouraged to understand why they are being praised, thus encouraging them to repeat this behaviour. When managing unwanted behaviour the nursery will aim to use positive preventative strategies. All staff are aware that it is an offence to use any form of physical punishment. Equally no child will face humiliation, be shouted at or demeaned in any way. For full details on managing behaviour please refer to the 'Behavioural Management Policy'. The nursery reserves the right to terminate the contract of a child when the manager considers the child to be disruptive or displaying inappropriate behaviour. We will not tolerate children, carers or parents speaking to any member of staff using inappropriate language or in a threatening or abusive manner. This will result in the termination of a nursery place.

**Security** Children will only be released to adults authorised to do so by the parents on the correct registration form. A password will be required if that person is not known to the staff. We only release children into the care of an adult, this is classed as over the age of 16 years old.

In an emergency situation, where the authorised adult cannot collect the child, the person who does collect the child will need to provide evidence that he/she has the authorisation of the parent/carer. The child's safety will be the





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primary concern at all times. Jack In The Box will contact the parents by phone if an unexpected person comes to collect the child. We reserve the right to refuse to release a child until the parent arrives.

**Liability** We accept no responsibility for any child whilst in the care of a parent or guardian on Jack In The Box premises or in the car park. We will not be liable for any loss suffered by parents, arising, directly or indirectly, from nursery closure or the non-attendance of a child for any reason; i.e. sickness, holidays, Bank Holidays etc . We accept no responsibility for any damage or loss to the child's or parents property; We accept no responsibility for any damage or loss to cars and property in the car park: however every effort will be made by staff to prevent this.

**Complaints** Jack In The Box accepts that every parent/ guardian has the right to express their views if they are unsatisfied with issues involving their child care or the nursery as a whole. Should such a situation arise we ask that parents raise the issue with the manager. A copy of all complaints will be kept at Jack in the Box and parents will be kept informed throughout.

I/we have read the Terms and Conditions and agree to work in partnership with Jack in the Box at all times to follow and abide by these.

I/ we have also completed and signed the registration form which forms a part of this contract and all documents required within the nursery. I/we are also aware the manager will be pleased to arrange meetings to discuss problems, children's work and records at any mutual agreeable time.

**Information Sharing and Common Assessment Framework** As a rule information which you and your child provide will only be shared with parental consent. However, there may be certain times when we need to share information, for example, when we need to find out if a child is at risk of harm, we will then follow our procedures with out parental consent.

**Duty of care in Early Years Settings** Everyone working with children has a "Duty of care" to keep children safe and protect them from harm. This means that we have a duty to report child protection or welfare concerns to Children's Services or the police.

Childs name:.....

Signed: \_\_\_\_\_(Parents/Guardians)

Printed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_d:

Signed: \_\_\_\_\_(Parents/Guardians)

Printed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Managers Signature.....Date.....