**Registration Form**

*“This organisation is committed to safeguarding and promoting the welfare of children and young people and expects all staff and volunteers to share this commitment”*

*Please complete all fields on this form so that we have the most current and up to date information regarding your child.*

**Full name of Child**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Known as** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Sex** \_\_\_\_\_\_ **D.O.B** \_\_\_\_\_\_\_\_\_\_\_\_

Sessions registering for:

 Monday Tuesday Wednesday Thursday Friday

**8am – 1pm**

**12noon – 5pm**

**7:30am – 6pm**

(or part of sessions please mark times)

We also offer extra hours such as breakfast club, lunch club and Late club. Please call for more information.

**Start Date: \_\_\_\_\_\_\_\_\_\_\_\_**

**Term time only:**  **‘Stretched’ Funding:**  **Full Day Care Private**:

**15 hour Universal funding (3-4years): YES NO**

**2 year old 15 hour Universal funding: YES NO**

**15 hour Extended funding (30 hours) (3-4 years): YES NO**

**30 hour code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parents NI number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Hot Lunch:**

**Extra –Curricular Activities:**  (these will be at an additional charge for those children whose parents are happy for them to participate, this will be a minimal charge)

**1st Parent/Guardian: Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1st Parent/Guardian: Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**1st Parent/Guardian: Contact Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2nd Parent/Guardian: Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2nd Parent/Guardian: Contact Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2nd Parent/Guardian: Contact Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Child’s Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Postcode**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Home Telephone** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I/we confirm that we have read the terms and conditions of registering a child and agree to these:

**Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_**

**Please make arrangements to pay the registration fee and deposit on returning this registration form.**

I/we agree with the terms and conditions of the Nursery requesting personal information and give consent for this to be used in in the manner it is obtained for and that this information can be shared where deemed vital and necessary. I/we also agree for my details to be kept on the database so that I/we can be kept up to date with any news in relation to my child or the Nursery. Please tick ‘OPT IN’ if you agree to these terms.

‘OPT IN’ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By giving us your consent, you have agreed that we can keep on file the information we have for you and that we are able to share important information with our governing bodies such as Bucks County Council Early Years and Funding team, Tapestry, Quick books and other authorities that we are in communication with. The consent will also allow us to continue communicating with you via emails and Newsletters etc.