



## REGISTRATION FORM

<b>Child's personal details:</b>			
Child's First Name(s):		Surname:	
D.O.B:	<b>Seen Birth Certificate:</b> <input type="checkbox"/>	Start Date:	
Gender:			
Address:		<b>Seen proof of address:</b> <input type="checkbox"/>	
Postcode:		<b>Proof of address used:</b> <input style="width: 100%;" type="text"/>	
		<b>Date issued:</b> <input style="width: 100%;" type="text"/>	

1. Parent/Carer's Personal Details	2. Parent/Carer's Personal Details
Full name:	Full name:
Relationship to child:	Relationship to child:
Address: <small>(if different to child's)</small>	Address: <small>(if different to child's)</small>
Home Tel:	Home Tel:
Mobile Tel:	Mobile Tel:
Email:	Email:
Employer's Name:	Employer's name:
Work Tel:	Work Tel:
Date of Birth:	Date of Birth:
NI Number:	NI Number:
Parent's ID type seen:	Parent's ID type seen:
<b>By signing I confirm, that both parents/carers have parental responsibility.</b>	
<input style="width: 100%;" type="text"/>	

Emergency Contact 1	Emergency Contact 2	Emergency Contact 3
Name:	Name:	Name:
Relationship to child:	Relationship to child:	Relationship to child:
Home Tel:	Home Tel:	Home Tel:
Mobile Tel:	Mobile Tel:	Mobile Tel:
Work Tel:	Work Tel:	Work Tel:

### Nursery Sessions

Please note – session times and opening times may vary between Panda Nursery Ltd facilities.

Sessions agreed:	Date agreed: <input style="width: 90%;" type="text"/>
Change to sessions attended:	Date agreed: <input style="width: 90%;" type="text"/>
	Signature: <input style="width: 90%;" type="text"/>

**Deposit of £30.00 is required to secure your child's place. Deposit paid**

**Payment accepted by:**  **Date:**

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**Child's health information and parental preferences:**

<b>Does your child have any allergies, dietary needs or special requests?</b> e.g. allergy to latex or plasters, food intolerance, vegetarian, halal etc.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so please state what these are:		
<b>Does your child have any illnesses or health problems?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so please state what these are:		
<b>Does your child have any disabilities or Special Educational Needs?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If so please indicate what these are and provide details of other professionals involved in your child's care: e.g. social worker, psychologist, play therapist etc.		

<b>Your family's ethnicity:</b>	
<b>You family's religion:</b>	
<b>Language(s) spoken at home:</b>	

Permissions:	Yes	No
I/we give permission for photos and videos of my child to be taken and to be added into their own and other children's Learning Journeys and displays around the nurseries <b>and</b> children's Tapestry Learning Journeys.	<input type="checkbox"/>	<input type="checkbox"/>
I/We give permission for our child to be taken on trips within the local area.	<input type="checkbox"/>	<input type="checkbox"/>
I/we give permission for staff to apply nursery sun cream and/or nursery nappy cream when required.	<input type="checkbox"/>	<input type="checkbox"/>
I/We give permission for our child to have face paint applied on occasions and events that happen in the nurseries.	<input type="checkbox"/>	<input type="checkbox"/>
I/We give permission for photos of our child to be used on the nursery website and Facebook pages.	<input type="checkbox"/>	<input type="checkbox"/>
I/We give permission to Panda Nursery Ltd to apply medical treatment or to seek medical advice in the event of an emergency. I /We understand that an Ambulance will ALWAYS be called should it be necessary.	<input type="checkbox"/>	<input type="checkbox"/>

**Declaration**

**I agree that Panda Nursery Ltd will not take responsibility for any items left by myself on the premises and by signing below I agree to the Terms and Conditions of Panda Nursery Ltd.**

Parent/ Carer's name:	<input type="text"/>	Parent/ Carer's name:	<input type="text"/>
Signature:	<input type="text"/>	Signature:	<input type="text"/>
Date:	<input type="text"/>	Date:	<input type="text"/>