Registration info (Office Only): [ ]

£50 Non-Refundable deposit to:

‘Winterbourne Early Years Centre’

ACC: 38308940 SORT CODE:52-10-51

Settling in dates 1)

2)

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| Room Requested: **Little Bears / Big Bears / Rainbow Bears** (PLEASE HIGHLIGHT)  Days Requested: MON AM/PM TUES AM/PM WED AM/PM THURS AM/PM FRI AM/PM (PLEASE HIGHLIGHT) | |
| **Childs details** | |
| First Name: Middle Name(s):  Last Name: Known Name(s):  Male [ ] Female [ ] Date of Birth: / /  Required start date:  Does your child attend another Setting or Child Minder? Yes [ ] No [ ]  *(If Yes, please specify) ………………………………………………………………………………………………………………………………………………………*  Religion:  Are there any celebrations or festivals that you would like us to celebrate as part of your culture?  *…………………………………………………………………………………………………………………………………………………………………………………………..*  Nationality:  First Language:  Spoken at home English [ ] Other [ ] *(please specify) ……………………………………………………………………………*  Who has parental responsibility for child?  *………………………………………………………………………………………………………………………………………………………………………………………….*  Is there a child arrangement order in place for your child? Yes [ ] No [ ]  Date of Child Arrangement order*………………………………………………………………………………………………………………………..*  Please name any other agencies that are currently involved with your child and/or family  i.e. Speech & Language, Family support worker, Childrens services  *…………………………………………………………………………………………………………………………………………………………………………………………*  Who lives with the child in their home (inc siblings and pets)  *…………………………………………………………………………………………………………………………………………………………………………………………*  My secure password for persons when collecting me from Pre-School is  *…………………………………………………………………………………………………………………………………………………………………………………………..* | |
| **Parent/carer one (primary contact)** | |
| First Name: Relationship to child:  Last Name: Email address:  Home address: *……………………………………………………………………………………………………………………………*  *……………………………………………………………………………………………………………………………………………………...*  Postcode: Place of work:  Mobile no: Work contact (if applicable):  Home no:  INFORMATION REQUIRED FOR FUNDING: 2yr funding / 30 hour funding (please highlight if applicable)  Date of Birth: / / Funding code:  NI Number: | |
| **Parent/carer two (secondary contact)** | |
| First Name: Relationship to child:  Last Name: Email address:  Home address: *……………………………………………………………………………………………………………………………*  *……………………………………………………………………………………………………………………………………………………...*  Postcode: Place of work:  Mobile no: Work contact (if applicable):  Home no: | |
|  | |
| **In case of emergencies** | |
| In the case of an emergency please provide two alternative contacts who you authorise to collect your child, Persons collecting must be over the age of 16.  Name: Relationship to child: Contact no:  Name: Relationship to child: Contact no: | |
| **Medical details** | |
| Doctors details  Name of Surgery:  Address:  Postcode: Tel: | Dentists details  Name of Surgery:  Address:  Postcode: Tel: |
| Name of health visitor:  Known allergies:  My child has no known medical conditions [ ]  My child has the following medical condition(s):  OFFICE: IS A HEALTHCARE PLAN REQUIRED: YES/NO  My childs immunisations are up to date: Yes [ ] No [ ] | |
| **Dietary details** | |
| My child has no known dietary needs [ ]  My child has the following special requirements: | |
| **Previous/additional settings** | |
| Are we able to make contact and share your childs current learning and development? It would be great to know more about them to ensure we provide for their current interests.  Setting name: Contact no:  Key Person (if known): | |
| **Permissions** | |
| Online I.C.T systems:  We use an online system to process the data received by yourself, the system we use is ‘FAMLY’ and can be downloaded as an app on most mobiles. We will use the provided email to ensure you have a log in prior to your child starting with us.  I’m happy for my child to have their own account set up within Famly [ ]  I will ensure that I follow the set up details which will be received viz the email I’ve provided [ ]  I will ensure that all permissions are accepted/declined prior to my childs start date [ ] | |
| **Additional Information** | |
| Is there anything you feel we need to know to ensure we can provide the highest level of care for your child during their time with us? | |
| **Little Bears ONLY** | |
| When your child turns three, will be attending: Rainbow Bears (St Michaels site) [ ]  Big Bears (Greenfield Site) [ ]  When you child turns three, will they be claiming: Universal 15 funded hours [ ]  Extended 30 funded hours [ ] | |
| I can confirm that all information provided in this document is accurate, and correct?  Signed: Date: | |
| I can confirm that I have read and understand all terms in the Terms and Conditions which were initially shared when enrolling my child at Winterbourne Early Years Centre.  Signed: Date: | |