



## REGISTRATION FORM

<b>Child's personal details:</b>	
Childs First Name(s):	Surname:
D.O.B:	<b>Seen Birth Certificate:</b> <input type="checkbox"/> <b>or Passport:</b> <input type="checkbox"/>
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"/>

<b>1. Parent/Carer's Personal Details</b>	<b>2. Parent/Carer's Personal Details</b>
Full name:	Full name:
Relationship to child:	Relationship to child:
Home Tel:	Home Tel:
Mobile Tel:	Mobile Tel:
Employer's Name:	Employer's name:
Work Tel:	Work Tel:
Date of Birth:	Date of Birth:
NI Number:	NI Number:
<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.

<b>Sessions agreed:</b>	<b>Date agreed:</b> <input style="width: 100%;" type="text"/>
<b>Change to sessions attended:</b>	<b>Date agreed:</b> <input style="width: 100%;" type="text"/>
	<b>Signature:</b> <input style="width: 100%;" type="text"/>

**A refundable deposit of £30 is required to secure your child's place.**

**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>only</b> .	<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 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 page.	<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 style="width: 90%;" type="text"/>	Parent/ Carer's name: <input style="width: 90%;" type="text"/>
Signature: <input style="width: 90%;" type="text"/>	Signature: <input style="width: 90%;" type="text"/>
Date: <input style="width: 90%;" type="text"/>	Date: <input style="width: 90%;" type="text"/>