



Registration Form

Name of child

Home Address
 & Telephone Number

 (Please provide proof of address)

Child's date of birth

Place in family

Child's Religion

Languages spoken at home

Child's Dietary
 Requirements

Significant medical
 Condition (if any)

Any Special needs/
 disabilities?

Father's name
 Place of work
 Work & mobile number

Mother's name
 Place of work
 Work & mobile number

Parental Responsibility

Mother Father Both

Name of Parent/s with
 Whom the child lives

Name of Parent/s with
 whom the child does
 not live

Does this parent/s have
 Legal access?

Person's authorised to
 collect the child

(Must be aged 18 or over)

Contact details of other professionals:

Doctor's name and address

Health visitor's name and number

Paediatrician's name and Number

Emergency contact name And number

(please nominate a responsible adult)

An up to date history of child's vaccinations, allergies and medical problems, will be required before start of sessions.

If full-time please tick box

If part-time, please tick boxes.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					

If full-day please tick boxes

Monday	Tuesday	Wednesday	Thursday	Friday

In registering my/our child for Clementswood Nursery, I/we have read understood and agree to abide by all the terms and conditions and conditions of fee payments laid down by the company.

I/we also agree that the nursery administer liquid paracetamol, provided that they have first obtained my/our permission and other medication which i/we have requested and supplied.

I/we also authorise the staff of the nursery to take my/our child on outings, e.g, on public transport, and walks outside the nursery premises under appropriate supervision.

I/we further agree that medical assistance can be obtained in the event of an emergency and that my/our child should receive any medical treatment deemed necessary by a qualified medical professional.

I agree to pay the registration fee of £50, which is non-refundable, and I also agree to pay a deposit of one full week which is refundable after a four week paid notice period.

This form is complete and accurate to the best of my knowledge and the nursery will be notified of any changes to the above details.

Signed.....

Name.....

Date.....

We are committed to safeguarding and promoting the welfare of children and expect all staff and volunteers to share this commitment.