

Registration Form Office use only

Tamba Day Nursery Limited

Preferred sessions:

Deposit of £ Paid Bank Card Cash

Meet & Greet:

Reg Fee of £ Paid Bank Card Cash

Settling in date & times:

Room:

Start Date:

Child Details

First name:

Middle names:

Surname:

Known as:

Date of birth:

Child's gender:

Age at registration:

Ethnic Origin:

Religion if any:

Languages spoken:

Who does child live with: *All family members in household (Names & Relation)*

Photo ID, i.e.
passport photo

Parent/ Carer 1: *Relationship to child:*

Tick if you have parental responsibility

Title: Full Name:

DOB: __/__/____

Marital Status:

NI Number:

Home address: *Inc Postcode*

Mobile number:

Home telephone number:

Email Address:

Profession:

Tick if you are a key worker

Work address and telephone number:

Photo ID, i.e.
passport photo

Parent/ Carer 2: *Relationship to child:*

Tick if you have parental responsibility

Title: Full Name:

DOB: __/__/____

Marital Status:

NI Number:

Home address: *Inc Postcode* *Tick if same as above*

Mobile number:

Home telephone number:

Email Address:

Profession:

Tick if you are a key worker

Work address and telephone number:

Photo ID, i.e.
passport photo

Emergency contact 1

The person we will contact if we cannot contact the first 2 contacts

Name:

Home address:

Home telephone number:

Mobile number:

Other number:

Their relationship to the child/parents:

Tick to confirm that this person is over the age of 16 years old. Proof of ID will need to be submitted

Photo ID, i.e.
passport photo

Emergency contact 2

The person we will contact if we cannot contact the first 3 contacts

Name:

Home address:

Home telephone number:

Mobile number:

Other number:

Their relationship to the child/parents:

Tick to confirm that this person is over the age of 16 years old. Proof of ID will need to be submitted

Photo ID, i.e.
passport photo

Collection: *IMPORTANT*

*If none of the adults submitted on this registration form can collect your child, you must call the nursery. At this point you will be asked to provide full details of the person collecting and we will provide you with a one-time password. This person must provide Photographic ID when attending. **Anyone collecting must be 16 years***

Children's Centre

Are you registered with a Children's Centre? Yes No If so which one?

If No, would you like to register with one though us? (Quick and easy) Yes No

Child's Doctors

Doctor's name, address:

And telephone number:

Childs' NHS number:

Other professionals: Is there any other professional involved with your child? Please tick the relevant options below. Please provide name and number.

- Speech and Language Therapist:**
- Social worker:**
- Educational psychologist:**
- Paediatrician**
- Health Visitor:**
- Common Assessment Framework (CAF):**
- Other, please specify:**

Health & Well-being:

Has your child had any of the following?	Yes	When, complications or any other comments
Chicken Pox		
Measles		
Rubella		
Tetanus		
Other, please specify		

IMPORTANT: Please give details of any allergies your child suffers from:

Allergy/ Dietary need	Side affects (if any)	Care plan needed	Is it a; <i>Diagnosed allergy, suspected allergy or family preference</i>
Medical conditions	Side affects (if any)	Care plan needed	Medication

Please note your child's start date may be delayed if they have an allergy or medical condition, which requires staff training, a care plan or any other additional support. Existing children who develop a new condition or allergy, which requires a health care plan, may not be able to attend nursery until a health care plan and/ or training is in place.

Please give any other information relating to your child that the nursery should be aware of:
Including birth marks, scars etc

Preferred sessions: Dependent on availability. (Please tick sessions required)

<u>Day</u>	<u>Full Day</u> 8 – 6	<u>Morning</u> 8 – 12.30 []	<u>Afternoon</u> 1.30– 6 []	<u>Funding only</u>	
				<u>Am</u>	<u>Pm</u>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Date I wish my child to start at the nursery: