



Stay and Play Pre-School-Enrolment Form

Squirrels Den, Felbridge Primary School
 Crawley Down Road,
 Felbridge,
 RH19 2NT
 ☎07858 069749
 ✉ staynplayfelbridge@gmail.com

Please ensure that you give as much detail about your child as possible, if you would prefer to fill in the form in discussion with us, then please ask

Sections marked * are part of our setting's contract, we require you to complete these parts.

*Child's full name: Male/Female	*Child's date of birth:
Child's known name: (if different to above)	
*Is your child's home language English? *If not, what is their home language?	
*Family address: *Postcode: Home Number:	*Name & Contact numbers during sessions: 1 2 3 *We sometimes may contact you via email as a line of communication. What is your email address? Are you happy for us to also send you letters and newsletters by email? YES / NO

*Name and Address of Parents / Carers with whom the child normally lives:

*Do all the above have parental responsibility for the child? YES / NO

*If NO, please state who has legal responsibility.

*Any other adults with parental responsibility / rights with whom the child does not live? YES / NO

*Details:

*Name:

Email address:

*Relationship to child?

*Is this person an emergency contact? YES / NO

*What is their phone number?

*Password for collection of child by adult unfamiliar to Nursery staff:

*Please provide details of two people who can collect and have your authority to act in an emergency for your child:

*Name:

*Contact number:

*Relationship to child:

**"I am happy for Stay and Play to contact me in the event of an emergency concerning..... (Child's Name)" Signed:*

*Name:

*Contact number:

Relationship to child:

**"I am happy for Stay and Play to contact me in the event of an emergency concerning..... (Child's Name)" Signed:*

We will not use these details until your emergency contact has filled in the 'emergency contact consent form' and it has been returned to us.

If no one can be contacted, in an emergency the Nursery Manager will allow other trained professionals to make decisions in the best interest of your child (e.g. medical staff)

*Child's doctor:

*Surgery name, address and telephone number:

*Child's Health visitor:

Telephone number:

*My child has had the following immunisations, please tick all those that are relevant

Diphtheria	HIB	Measles (separate vaccine)	Mumps (separate vaccine)
Rubella (separate vaccine)	Meningitis C	MMR	Polio
Tetanus	Whooping Cough (Pertussis)	Other (please specify)	Other (please specify)

*My child has had the following childhood illnesses / diseases, please tick all those that are relevant

Chicken Pox	Measles	Mumps	Hand, foot and mouth
Impetigo	Other (please specify)	Other (please specify)	Other (please specify)

*Has your child any medical condition we should be aware of? (Asthma, eczema etc.) YES / NO

*Details:

*Do nursery staff need any special training to be able to accommodate your child's medical needs? YES / NO

*Details:

*Has your child any allergies or food intolerances? YES / NO

*Details:

*If yes, how does your child react to these? (So that we know the symptoms to look for in cases of emergency)

Dietary **PREFERENCES**, please tick all those that are relevant

My child is a vegetarian	My child is a vegan	My child does not eat pork	My child eats fish but not meat
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*Is there any other dietary information that we need to know?	YES / NO
*Details:	
*Does your child have any other diagnosed special needs and / or need any additional support?	YES/NO
*Details:	
*Are there any other professionals involved with your child? E.g. speech therapy or paediatrician?	YES/NO
*Details:	
*Name:	
*Contact details:	
Will your child be attending any other childcare setting as well as Stay and Play? (e.g. another Nursery, a child minder or a Nanny?)	YES / NO
Details:	
Name of setting:	
Contact details:	
Name of Key person:	
Has your child previously attended a childcare setting?	YES / NO
Details:	
Name of setting:	
If you are applying for education funding, please provide the following details:	
<ul style="list-style-type: none"> • A copy of your child's birth certificate or passport to confirm their age • Your 30-hour funding confirmation code to enable us to apply for the funding on your behalf <p>(Eligibility criteria apply)</p>	
Please note that you will be required to complete additional forms to claim education funding	

Permissions

*Are you happy for us to use your email address to add you as a user on Tapestry? YES / NO

*Are there any other adults who would like to be added as users to your child's Tapestry account?
YES / NO

*Details:

*Name:

*Email address:

setting will contact via email to invite participation in Learning and Development records.

*I understand that there are photographs of my child in support of their learning and development that will be stored on Tapestry YES / NO

I am happy that there may be photographs of my child which are seen by adults associated with Stay and Play setting in the context of celebrating the setting or tracking learning and development YES / NO

*I give consent for photographs to be taken of my child for display and / or record keeping purposes?
(Photographs will be kept in setting, or stored and uploaded for printing purposes on computer) YES / NO

*I give consent for photographs that I approve individually to be taken of my child for the Pre-School website and Facebook page YES / NO

*I give consent for staff and other agencies such as Area SENCO and Health Visitors to carry out and record observations of my child, for the purpose of developmental assessment: YES / NO

*I give permission for my child to be taken off site for short walks or to the park as part of Nursery activities. YES / NO

*I give permission for my child to participate in celebrations and festivals as part of the curriculum, this may include sweets, chocolate or other foods given during festivals and celebrations? YES/NO

I give permission for Pre-school staff to put a hypoallergenic plaster onto a minor wound if necessary, to keep a wound clean YES / NO

*I give permission for the Pre-School to act in the best interests of my child in the event of a medical emergency: YES/NO

*I consent to abiding by the polices, rules and regulations of the setting (these are available on request)
YES / NO

