

**Welcome to Ullesthorpe Pre-school.**

Here at Ullesthorpe Pre-school we offer and early years learning environment for 2-4 year olds before they start school. We strive to offer a welcoming home from home environment where children can feel confident in developing their individual interests and learning styles to start their journey towards their future.

We look forward to working in partnership with Parents/Carers to provide the best learning environment and opportunities for your child.

**We require information**

We need some information from you, so could you please answer the questions within this form and return to the Pre-school as soon as possible along with a copy of your child’s full birth certificate. No child will be admitted until we have seen this document. We will also need to see your child’s health record (red book) prior to them starting with us.

**Answering your questions**

If you require any support in completing this form or have any questions then please contact the Pre-school on 01455 208375 or email [ullesthorpe@btconnect.com](mailto:ullesthorpe@btconnect.com) where a member of the team will be happy to help.

**Data Protection**

This data is being collected for the purpose of essential pre-school information to comply with legal requirements and is in accordance with the General Data Protection Regulation 2018.

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| --- | --- | --- | --- | --- | --- |
| Registration Form All information will be treated as confidential to the pre-school. | | | | | |
| Child’s Legal Surname  Click or tap here to enter text. | | Legal Forenames  Click or tap here to enter text. | | | |
| Preferred Surname  Click or tap here to enter text. | | Preferred Forename  Click or tap here to enter text. | | | |
| Address: Click or tap here to enter text. | | Date of Birth Click or tap here to enter text. | | | |
| Home Telephone Click or tap here to enter text. | | | |
| Postcode Click or tap here to enter text. | | | |
| We are required to record the names and address of every person who has parental responsibility | | | | | |
| Name Click or tap here to enter text. | | Name Click or tap here to enter text. | | | |
| Relationship Click or tap here to enter text. | | Relationship Click or tap here to enter text. | | | |
| Address Click or tap here to enter text. | | Address Click or tap here to enter text. | | | |
| Postcode Click or tap here to enter text. | | Postcode Click or tap here to enter text. | | | |
| Telephone number Click or tap here to enter text. | | Telephone number Click or tap here to enter text. | | | |
| Mobile Click or tap here to enter text. | | Mobile Click or tap here to enter text. | | | |
| Work Click or tap here to enter text. | | Work Click or tap here to enter text. | | | |
| Email Click or tap here to enter text. | | Email Click or tap here to enter text. | | | |
| Name of Parent/Carers with whom the child lives with if different from those with parental responsibility | | | | | |
| Name Click or tap here to enter text. | | Relationship to child Click or tap here to enter text. | | | |
| Telephone Click or tap here to enter text. | | | | | |
| Is the child legally in care? If Yes, please provide below | | | | | |
| Carer’s name Click or tap here to enter text. | | Social workers name Click or tap here to enter text. | | | |
| Address Click or tap here to enter text. | | Address Click or tap here to enter text. | | | |
| Contact number Click or tap here to enter text. | | Contact number Click or tap here to enter text. | | | |
| Please write any further information you may wish to give us about your child or circumstances: (court orders, access an contact)  Click or tap here to enter text. | | | | | |
|  | | | | | |
| Child’s Doctor Click or tap here to enter text. | | **Medical Conditions/ Allergies** *(Please note if long term medications are required, please request a medicine agreement form from the Pre-school)*  Click or tap here to enter text. | | | |
| Surgery Address  Click or tap here to enter text. | |
| Telephone number Click or tap here to enter text. | |
| Health visitor name Click or tap here to enter text. | | Telephone number Click or tap here to enter text. | | | |
| Special Needs- please detail any Special Needs | | | | | |
| Click or tap here to enter text. | | | | | |
| Please list Professionals involved with your child. Please include their name, agency and contact details | | | | | |
| Click or tap here to enter text. | | | | | |
|  | | | | | |
| Ethnicity Click or tap here to enter text. | Home language Click or tap here to enter text. | First Language Click or tap here to enter text. | | | Religion Click or tap here to enter text. |
| Is English an additional language? If so do you consider your child to be (please tick appropriate) | | | | | |
| Fluent | Average | Poor | | | Non spoken |
| Parent/carer signature Click or tap here to enter text. | | | | Date Click or tap here to enter text. | |
| Parent/carer signature Click or tap here to enter text. | | | | Date Click or tap here to enter text. | |
| Preschool Use Only | | | | | |
| Birth Cert Seen | | | Immunisations | | |
| 2yr Check | | |  | | |

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| **Permissions** | | |
| This form will cover your child for their entire time at Ullesthorpe Pre-school, unless informed otherwise. If you wish to change your authorisation at any time, please contact the Pre-school. | | |
| Name of Child Click or tap here to enter text. | | |
| **Please delete the appropriate give/do not give on each statement and sign the end of the page** | | |
| **Outings**- I give/do not give permission for my child to be taken out into the local community by a qualified member of staff. This would include visits to the local park, shops etc. | | |
| **Food tasting-** I give/do not give permission for my child to take part in food tasting activities. We will always refer to our known allergy information provided by yourself for your child before we taste any food. | | |
| **Emergency hospitalisation-** I give/do not give permission for my child to be taken directly to hospital in the event of an emergency. They will be accompanied by a member of staff. | | |
| **Paracetamol-** I give/do not give permission for staff to administer paracetamol based products (e.g. Calpol) to my child in the case of a raised temperature and on the understanding that I will make arrangements for my child to be collected as soon as possible in accordance with the setting’s procedures on the administration of medicines. | | |
| **Anti-histamine-** I give/do not give permission for my child to be administered anti-histamine (liquid form) in response to a potential allergic reaction to a sting/ bite, that may cause shortness of breath or a nasty rash. Please note we will always inform Parents/Carers immediately after administering anti-histamine. | | |
| **Plasters-** I give/do not give permission for a plaster to be applied to my child where necessary. | | |
| **Sun cream-** I give/do not give permission for staff to apply sun cream when necessary **(that I will supply with my child’s name on and date it was opened)**. | | |
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| **Parental Consent for images** | | |
| * As part of our on-going recording of our curriculum and for children’s individual development records, staff regularly take photographs and videos of the children during their play and learning. * We will not use full names or personal information of any child in a photographic image or video on our website, online, in our prospectus or in any other printed publication. * We may include pictures of children and adults that have been drawn by the children. We may use group photographs or footage with general labels. We will only use images where children are suitably dressed. * This consent can be withdrawn at any time by informing Ullesthorpe Pre-school in writing. | | |
| **Please delete as appropriate** | | |
| May we use your child’s image in displays around the preschool? | | **Yes/ No** |
| May we record your child’s image or use videos for your child’s learning journal or other educational uses within the Pre-school? | | **Yes/ No** |
| May we use your child’s image on our Pre-school website and other online platforms (e.g. Facebook)? | | **Yes/ No** |
| May we use your child’s image in our prospectus and other printed publications that we produce? | | **Yes/ No** |
| Are you happy for your child to appear in the media? | | **Yes/ No** |
| Are you happy for the Pre-school to print images of your child? | | **Yes/ No** |
|  | | |
| I have read and understood the conditions of use and I am aware of the following:   * **Websites can be viewed worldwide and not just in the UK where UK laws apply.** * **We will discuss, where appropriate, the use of the photos with the children.** * **The Press are exempt from Data Protection Laws and may want to include full names of pupils.** | | |
| Signed Click or tap here to enter text. | Date Click or tap here to enter text. | |
| Please Print Name Choose an item. | | |

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| **Sessions** | | | | |
| Ullesthorpe Pre-school is open Monday to Friday 9-3, term time only. We have a range of sessions with funded places available. All 3 year olds are entitled to 15 hours of free early learning experience per week, and up to 30 hours depending on parents’ eligibility. The funded sessions can be used across the week and additional sessions can be paid for if required.  Extra sessions are charged as follows:   |  |  | | --- | --- | | **Morning or afternoon sessions 9-12 or 12-3** | **£14.50** | | **Morning session and stay for lunch** | **£19.00** | | **Full day** | **£28** | | **Extra hour** | **£4.75 per hour** |   Invoices will be sent in advance via email and should be paid by the 15th of each month. Failure to do so will incur a late fee and regular late payments or non-payments may put your place at risk. | | | | |
| When would you like your child to start: Click or tap here to enter text. | | | | |
| Please tick below the days and sessions you wish your child to attend. *(Please note sessions are dependent on availability and you will be contacted as soon as possible to confirm sessions prior to starting.)* | | | | |
|  | **Morning**  **9-12** | **Morning and stay for lunch 9-1** | **Afternoon**  **12-3** | **Full day**  **9-3** |
| **Monday** |  |  |  |  |
| **Tuesday** |  |  |  |  |
| **Wednesday** |  |  |  |  |
| **Thursday** |  |  |  |  |
| **Friday** |  |  |  |  |
| **Eligibility** | | | | |
| **30 hour funding for 3 year olds**  The extended entitlement of 30 hours funding is intended to support working parents with the cost of childcare and enable them, where they wish, to return to work or to work additional hours. The additional hours will be available to families where:   * Both parents are working (or the sole parent in a lone parent family) * Both parents are working includes circumstances where:   - One or both parents are temporarily away from the work place on parental, adoption, maternity or paternity leave;  - One or both parents are temporarily away from the workplace on statutory sick pay;  - One parent is employed and one parent has substantial caring responsibilities based on specific benefits received for caring; or  - One parent is employed and one parent is disabled or incapacitated based on receipt of specific benefits.   * Each parent has a weekly minimum income equivalent to 16 hours at national minimum wage or living wage. Parents do not necessarily need to actually work 16 hours a week, but rather their earnings must reflect at least 16 hours at national minimum wage (£111.20) or national living wage (£115.20) and; * Neither parent has an income of more than £100,000 per year.   **2 year old childcare funding**  Families are eligible if they:  • access working tax credits with an annual household income below £16,190  • have a child that has been, or is currently, cared for by the local authority  • have a child that has a Statement of Educational Needs and Disability, Education Health and Care Plan or claims Disability Living Allowance  To see if you can access free childcare for your 2 year olds, please visit: **www.myearlylearning.co.uk/earlyyears/apply**  You will be asked for the following information:  • Your name, National Insurance (or National Asylum Seeker Support) number, date of birth and address, • Your child’s name and date of birth. | | | | |