Registration Form and Financial Agreement

Parents name: (Primary Carer)		Address:				
Parent DOB		Email-				
Mobile number:		Legal gu YES	ardian? NO		Sign:	
NI Number:		Relation	ship to child:			
Parents name: (Secon	idary Carer)	Address	:			
Parent DOB		Email-				
Mobile number:		Legal gu YES	Legal guardian? Sign: YES NO			
NI Number:		_	ship to child:			
Childs Name:		Name c	nild is known by:		Long Birth certificate seen? YES NO	
Photocopy of long birth certificate in child's file to supp			arental responsibility?	YES	NO NO	
Child's D.O.B:		Child re	sides with; (circle as a	ppropriate) both paren		
Nationality:		Place of		both paren	to other	
Emergency contact name 1:		Telepho	ne number:			
Relationship to you:						
Emergency contact name 2:		Telephone number:				
Relationship to you:						
Please note – In line with OFSTED regulations the nursery has to have details of both parents (if both parents are on the child's birth certificate) on the nurseries registration forms. We will only use the secondary carer's details in an emergency and with previous consent from the primary carer.						
If you want to refuse a	as primary carer to give the r			rmation we	will require your written	
	EFUSE TO GIVE Little explore	ers NURSE	RY THE SECONDARY C	ARERS INFO	ORMATION OF WHO IS	
NAMED ON MY CHILD'S BIRTH CERTIFICATE (SIGNED)(DATE)(DATE)						
Contracted Hours						
Monday	FULL DAY	AM SES	SION	PM SESSIC	ON	
Tuesday	FULL DAY	AM SESSION		PM SESSION		
Wednesday	FULL DAY	AM SES	AM SESSION		PM SESSION	
Thursday	Thursday FULL DAY		AM SESSION		PM SESSION	
Friday	FULL DAY	AM SES	SION	PM SESSIC	DN	
Start Date:	Weekly Fees		Monthly Fees	F	Parent Sign:	

Terms and Conditions of Enrolment

Fees and payment terms

- i. Payment of fees will be paid standing order from your bank or payment card on 1st of each month or Monday of each week if paying weekly. Payments are collected in advance weekly or monthly depending on preference. Fees are payable 52 weeks of the year. Your invoice is created monthly via xero and any additional sessions requested during that month will be added to your next month invoice.
- ii. Payment is for your child's place and is not based on attendance. Full fees are payable for sickness and absence due to holidays.
- iii. 1 month's written notice is required for any child permanently cancelling their place with us.
- iv. A late payment fee of £10.00 per letter and additional charges of £2.00 per day will be charged to parent/legal guardians if their nursery fees are paid late or not in full or no arrangement of pay is made.
- v. A late collection fee of £5 for every 5 minutes a child is left after the close of nursery will be added to parent's account.

Data Protection

vi. During the course of our instruction we will need to process your personal data. When doing so we confirm that we shall comply with the provisions of the General Data Protection Regulations 2017 from 25 May 2018. We will need to process your personal data to complete the terms of this agreement and are likely to use it when maintaining our client records and/or for complying with supervisory, regulatory and legal requirements and crime prevention. In order to comply with our supervised requirements we will need to share your personal information with our supervisor, OFSTED. Further details on our usage of and the protection of your personal data can be found in our Privacy Notice.

Electronic and other communication

vii. We will communicate with you by email, and we confirm that it will be the responsibility of the recipients for checking emails and attachments for viruses. We will not be responsible for problems, accidental errors, losses or corrupted and altered data affecting the electronic communications after despatch.

Complaints

viii. We are committed to providing you and your child(ren) with a high quality service. However, should there be any cause for complaint in relation to any aspect of our service please contact us. We agree to look into any complaint carefully and promptly and do everything reasonable to put it right. If you are still not satisfied you can refer your complaint to(refer to complaint procedure if you feel you need to escalate further)

Confidentiality

ix. Communication between us is confidential and we shall take all reasonable steps to keep confidential your information except where we are required to disclose it by law, by regulatory bodies, by our insurers or as part of an external peer review. Unless we are authorised by you to disclose information on your behalf this undertaking will apply during and after this engagement

Period of agreement and termination

- x. Unless otherwise agreed, our service will begin when you agree to the terms and conditions or enrolment.
- xi. Each of us may terminate our agreement by giving not less than 30 days notice in writing to the other party except where you fail to cooperate with us or we have reason to believe that you have provided us misleading information, in which case we may terminate this agreement immediately. Termination will be without prejudice to any rights that may have accrued to either of us prior to termination.
- xii. In the event of termination of our agreement, we will endeavour to agree with you the arrangements for the completion of service in progress at that time, unless we are required for legal or regulatory reasons to cease service immediately. In that event, we shall not be required to carry out further work and shall not be responsible or liable for any consequences arising from termination.

Applicable law

xiii. Our terms and conditions of enrolment are governed by, and should be construed in accordance with English law. Each party agrees that the courts of England will have exclusive jurisdiction in relation to any claim, dispute or difference concerning this engagement letter and any matter arising from it on any basis. Each party irrevocably waives any right to object to any action being brought in those Courts, to claim that the action has been brought in an inappropriate forum, or to claim that those Courts do not have jurisdiction.

Please sign to confirm that	t you agree to abide by our Tern	ns and Conditions.
Sign:	Print:	Date:
person/s, proof of ID; e.g. phot	ograph, personal details will be r	r child is to be collected by another required or a password system is in a child must be over the age of 16
Your password is		
Sign:	Print:	Date:
, , , ,	our child to be taken out of the boutings, e.g. library, shops, parks	puilding/premises by a member of etc - Yes No
Signed	Print name	Date
*Please note – Your child will I and you will be offered to join		y trip. These are organised events
4. Do you give permission for y	our child to be photographed/vio	deoed for the purposes of:
Children's learning and develo	pment files - Yes No	
Displays and images around th	ne building – Yes No	
Flyer and posters to promote t	the nursery – Yes No	
Little Explorers Facebook page	e – Yes No	
Little Explorers Web page – Ye	s No	
Signed	Print name	Date

Key persons, students and apprentices

Do you give permission for keypersons, students and apprentices to carryout written observations on your child for development and training purposes? Please be informed that no personal details will be given to identify my child if it is an observation for college or university study

	•	YES	NO			
Signed	F	Print na	me		_ Date	
Medical Details						
Does your child suffer from	n any illness o	r disabi	lity, e.g. astl	nma, deafness, e	pilepsy, diabe	tes, etc?
Yes			No			
If yes please specify;						
Does your child have any advice, e.g. peanuts, dairy	_	-		eeds relating to r	eligious belief	, medical
Yes			No			
If yes please specify;						
Does your chid have any s	pecial comfort	ters, e.g	. security bl	ankets, teddy et	c?	
Yes			No			
If yes please specify;						
Has your child been immu	nised against;					
Diphtheria	Y	N	Polio		Y	N
Whooping cough	Y	N	MMR		Y	N
Tetanus	Y	N	HIB		Y	N
I give permission for the c child may need during my		on duty	to administ	er any first aid/m	nedical attenti	on my
Signed	Print nam	ie:		Da	te:	
I consent to any emergend Nursery	cy treatment n	iecessar	y whilst my	child is in the ca	re Little Explo	rersDay
Signed	Print nam	ie:		Da	te:	

	. .	6 .
Signed:	Print name:	Date:
Child Protection		
Please note		
child protection proced Children 2015, it is imp	dures as deemed necessary. In line v	1989 to adhere to and put in to affect ar with the Working together to Safeguard gencies are working with your family so are.
Social workers name		
Геlephone number		
Address and email		
amily support worker	name	
Telephone number		
Address and email		
Health visitor's name		
Геlephone number		
Address and email		
Signed (Parent)	Pri	int
Date		
Equal opportunities		
	d families are welcomed and inductenities policy/procedure.	ed to the nursery in accordance with ou
	aff are appointed as equal members ir job description.	of staff to carry out their duties as
Parent's wishes with re	egard to the welfare of their children	will be addressed in line with our equa
	rocedures and Ofsted registration re	quirements.

Code of Behaviour

Within the childcare provision it is extremely important that all parents/carers and staff take in to consideration the welfare of all users.

Health and safety policy, confidentiality policy, safeguarding policy and behaviour policy are to be adhered to at all times. Copies of the above policies are included in your welcome pack.

Parental Permission Form			
Do you give permission for your child to have protective barrier cre during nappy change?	am applied as necessary		
Yes No			
Do you give permission for your child to have protective sunscreen whist outside?	n applied as necessary		
Yes No			
Do you give permission for your child to have plasters, gauze or other medical sterile dressings applied when necessary following an accident?			
Yes No			
Do you give permission for your child to have Calpol suspension administered within the dosage/age guidelines stated for the medication, should your child develop a temperature that Little Explorers Nursery Manager/Officer in charge consider to be of concern?			
Yes No			
Do you give permission for your child to have Piriton (antihistamine) administered in the event that your child has an allergic reaction whilst at nursery?			
Yes No			
Do you give permission for your child to have an ice pack applied w following an accident?	hen/where necessary		
Yes No			
Do you give permission for our social media company to upload phowebsite page and social media pages.	otos of your child on our		
Yes No			
Email address -			
Do you give permission for your child to take part in daily tooth bru This is important as Salford have one of the poorest dental hygiene being added to our drinking water.	-		
Yes No			

Signed (parent)
Signed Manager/Deputy
Date:

Declaration

- I declare that the information given is to the best of my knowledge accurate.
- I have received a copy of the Childcare manual and the welcome booklet.
- I will notify staff in writing of any changes to the information I have given on the admission forms.

Signed (parent)	Print
Signed (Practitioner)	Print

Please note

The contract relating to the childcare provision is conditional upon the parent/legal guardian complying with our childcare and financial procedures.

- Any false information given knowingly on the admission form may result in the withdrawal of your childcare allocation
- We reserve the right to refuse place allocation in to the childcare provision. We reserve the right to withdraw childcare place due to none payment of childcare fees and inform HMRC where CTX fraud is suspected.

Fee Calculation

Full Days per week	x	
	Plus	
Sessions per week	х	
	Total	
Funded Hours	Deduction	
Sibling discount	Deduction	
	Weekly Total	
	Monthly Total	
Workplace vouchers/Salary sacrifice	Deduction	
	Weekly Total	
	Monthly Total	