

ENROLMENT FORM



Child's Details

Child's First name:

Child's Surname:

Gender: Male Female Date of Birth: / /

Address:

Postcode:

Emergency Tel:

Nationality: Sibling to:

Languages Spoken at Home:

Attach Child's Photo

Session Details

Sessions Requested:
Monday Tuesday Wednesday Thursday Friday

FEED Funding:
2 Year Funding 3 Year Universal 3 Year Extended

Full Year Term Time Holiday Club Breakfast Club Afterschool Club

Additions:

Parent/Carer Details

Full name:

Address (if different from above):

Parent NI:

Parent Date of Birth: Postcode:

Relationship: Mobile Tel:

Occupation: Work Tel:

Email:

Parental/Legal Responsibility for Child: Yes No

Attach Photo

Full name:

Address (if different from above):

Parent NI:

Parent Date of Birth: Postcode:

Relationship: Mobile Tel:

Occupation: Work Tel:

Email:

Parental/Legal Responsibility for Child: Yes No

Attach Photo



Emergency Contacts

Contact 1:

Full name:	
Address:	
	Postcode:
Relationship:	Mobile Tel:

Attach Photo

Contact 2:

Full name:	
Address:	
	Postcode:
Relationship:	Mobile Tel:

Attach Photo

Medical Details

Doctor/Surgery Name:	Tel:
Dentist Name:	Tel:
Health Visitor Name:	Tel:
History of any illnesses:	
Allergies/Dietary Needs:	
Medication taken:	
Any Other Information:	

Immunizations: (Please Circle)

BCG Y/N **MMR** Y/N **Diphtheria** Y/N **Polio** Y/N **HIB** Y/N **Tetanus** Y/N
Whooping Cough Y/N

Declarations (please Circle the correct option):

I/We agree for my child in the event of an emergency to be taken to hospital when necessary and to be seen by medical professionals to seek advice. Yes No

I/We agree for my child to be taken on nursery outings Yes No

I/We agree for my child to be taken on supervised outing using public transport i.e. bus Yes No

I/We give permission for nappy barrier cream and sun cream to be applied when supplied by parent/carer. Yes No

I/We give permission for Nappies/Pull Ups & Baby Wipes to be used when supplied by the nursery. Yes No



I/We give permission for anti -bacterial hand hygiene gel to be used on my child's hands when supplied by the nursery.	Yes	No
I/We agree for nursery staff to apply a hypoallergenic plaster onto a minor wound if necessary to keep a wound clean and provide general first aid if required.	Yes	No
I/We 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/We have understood the information about the Tapestry system and agree to receive an email message in order to gain access to the app and see observations/photos/videos of my child.	Yes	No
I/We understand that there may be group photographs/videos that incorporate images of my child, other children and teachers. I agree that these photographs/videos may be used in other children's learning journeys. To protect and respect privacy, I agree not to use/upload/ share the photographs, videos and audio recordings involving other children on public web-sites such as social media websites and may not utilise information from my child's learning journey for purposes other than understanding the development of my child.	Yes	No
I/We give consent for phone numbers provided to be used to contact us regarding our child.	Yes	No

I, (parent/carer name), declare that I understand:

- Kid's Corner Nursery has a legal and legitimate interest to collect and process personal data in order to meet statutory requirements
- How my data will be used
- That Kids Corner Nursery may share it's collected data with Leicester City Council/local authorities
- Data will not be shared with any other third parties without my consent, unless the law requires the nursery to do so; the nursery will always ask for explicit consent where this is required.
- My data is retained with the data protection policy.
- My rights to the processing of my personal data.
- Where I can find out more information about the processing of my personal data.

(Please remember, under the GDPR you can withdraw your consent at any time)



Please understand that we will not allow any child to start at nursery until we consider they are settled and feel comfortable.

The following documents will be accessible for all parents/carers during the child's care at the nursery, via our website www.kidscornernursery.net and at the setting (parents notice board). Hard copies can be requested.

- The Nursery terms and conditions,
- Policies and Procedures of Kids Corner Nursery LTD
- Privacy Notice

It should also have been explained to you:

- Where the parents information board is
- What the Privacy Notice is
- What the Nursery's medication policy says
- Where and how fees are paid
- Where the Nursery policies and procedures are kept
- How to make comments and suggestions about the Nursery
- How to complain if there is something you are not happy with

I/We have read, understood and agree to abide by Kids Corner Nursery Ltd Terms & Conditions and Policies & Procedures.

I/We also understand that the standard terms & conditions and policies & procedures of Kids Corner Nursery Ltd we will undergo reasonable changes from time to time as circumstances require and will apply in all our dealings with Kids Corner Nursery Ltd.

I/We declare that all the information given is true and any changes will be immediately notified to the Nursery.

I/We also understand that Kids Corner Nursery Ltd may obtain, process and hold personal information about our child, including sensitive information such as medical details, or legal documents.

I/We also agree all details of parental responsibility given are true and accurate and all parents with responsibility will be contacted, copies of letters / reports unless they instruct us otherwise.

I/We consent to Kids Corner Nursery Ltd corresponding with both parents/carers, and understand that unless otherwise legally advised, Kids Corner Nursery Ltd has an obligation to communicate and allow contact with both parents in the interest of the child.

Parent/Carer 1: Relationship to child.....

Sign: Print Name: Date:/...../.....

Parent/Carer 2: Relationship to child.....

Sign: Print Name: Date:/...../.....

