



muddy boots
DAY NURSERY

Registration form

Child's details

Forenames Surname.....

Name child is known by

Date of birth.....Gender : Male Female

Child's spoken/written language

Parents spoken/written language (is translation required?)

Parent/Guardian details

	Parent/Guardian 1	Parent/Guardian 2
Relationship to child		
First name		
Surname		
Contact number Home		
Work		
Mobile		
Email		
Home address (include postcode)		

Who does the child live with

Who has parental responsibility

Who has authority to collect the child. Please provide photos of each of the named persons below for our records.

Please provide us with a password for additional security. **Password**

Name	Contact number	Relationship to child

Booking details – Please indicate below your preferred days of attendance.

Start date

Monday	Tuesday	Wednesday	Thursday	Friday

Are you a full time student at Trinity College Bristol ? Yes / No

College grounds

To be able to take full advantage of the college grounds and broaden the child’s experiences, we like to take the children outside of the nursery registered premises.

I agree for my child to be taken for walks outside of the nursery registered premises.
Yes / No

Photographs

We take photographs and videos of the children as they play. This is mainly for nursery use, they may also be included in other children’s learning diaries.

I agree to photographs or videos being taken of my child in the nursery environment
Yes / No

We have special times at nursery for which parents may also want to take photographs – Christmas celebration, summer picnic, etc.

I agree to photographs being taken of my child by another parent.
Yes / No

Observations

As part of the staff’s on going training it may be necessary for them to make observations of the child as they play. Only first names would be used.

I agree to observations being used for training purposes.
Yes / No

Suitable clothing

Please ensure you dress your child appropriate for the weather.

Please provide for your child for their time in nursery (all to be labelled) – wellington boots, a waterproof coat (or all in one) indoor shoes, a hat (winter and summer) and a spare set of clothes.

Signed **Date**

Health and welfare

Name of Doctor/Clinic	
Address	
Telephone	
Email	
Health visitor	
Based at :	

Was your child born to date ? Yes / No

Has your child had any major illness, operations or hospital stays ?

.....

Does your child have any health problems or take regular medication?.....

Are you awaiting any appointments

.....

Does your child have any additional needs / specialised equipment?.....

Are any other professionals involved with the family – currently or in the past ?

.....

It is the parent's duty to inform the nursery of any changes in their child's health or medication.

Diet

Does your child have any dietary needs, allergies or intolerances? Yes / No

If yes please give details

What are the symptoms/reactions ?.....

Has your child ever been stung by an insect ? Yes / No

If yes - did they have a reaction?.....

No food is to be brought into nursery that may contain nuts.

Emergency contacts

Name	Contact number	Relationship to child

I give permission for emergency first aid and for staff to seek further medical advice or invention in an emergency or if my child falls seriously ill whilst in their care. Yes / No

Has your child had the following vaccinations?

Age	Vaccination		
2 months	5-in-1 (DTaP/IPV/Hib)	Pneumococcal (PCV)	Rotavirus
3 months	5-in-1 (DTaP/IPV/Hib)	Meningitis C	Rotavirus
4 months	5-in-1 (DTaP/IPV/Hib)	Pneumococcal (PCV)	
12/13 months	Hib/Men C booster	Measles, mumps and rubella (MMR)	Pneumococcal (PCV)
2, 3 and 4 years	Children's flu vaccine (annual)		
3 yrs 4 mths, or soon after	Measles, mumps and rubella (MMR) vaccine	4-in-1 (DTaP/IPV) pre-school booster	

I agree to my child having any nappy, wipe or cream to be used during their time at nursery. Yes / No

I do / do not given permission for face paints to be used on my child Yes /No

Please can you apply sun cream to your child before they come to nursery in the warmer weather.

We will reapply nursery sun cream when necessary throughout the day.

I give permission for nursery to apply sun cream Yes / No

I will provide alternative sun protection (please ensure the sun cream you provide is clearly labelled with your child's name and does not contain any allergens)

Please specify if your child is allergic to certain makes of sun cream.

We have an obligation to report to the relevant authorities any suspicions we have that Your Child has suffered neglect or abuse, and where necessary we may do so without Your consent and/or without informing You.

We ask our staff not to build social media relationships with our parents. We ask parents not to request or accept friendship requests or equivalent from our staff. We expect the highest level of professionalism from our staff whilst they are at work but also respect their right to privacy at home.

Signed **Date**