**The Treehouse Nursery Registration Forms**

**Child’s Details**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Child’s first name(s) | | |  | | | | | | | Surname | | |  | |
| Name known as | | |  | | | | | | | | | | | |
| Child’s full address | | |  | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| Gender |  | | | Date of birth | | |  | | Birth certificate seen and copy made  Yes □ No □ Signed: | | | | | |
| **Family Details** | | | | | | | | | | | | | | |
| Names of the people the child lives with: | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | |
| ***Contact Details 1 (including emergency information):*** | | | | | | | | | | | | | | |
| Parent/carer full name | | | | | Date of Birth: | | | | | | | | | |
| Relationship to child | | | | | National Insurance Number: | | | | | | | | | |
| Daytime/work telephone | | | | |  | | | | | | Mobile | | |  |
| Home telephone | | | | |  | | | | Email | | |  | | |
| Home address | | | | |  | | | | | | | | | |
| Work address | | | | |  | | | | | | | | | |
| Does this parent have parental responsibility for the child? Yes □ No □ | | | | | | | | | | | | | | |
| ***Contact Details 2 (including emergency information):*** | | | | | | | | | | | | | | |
| Parent/carer full name | | | | | Date of Birth: | | | | | | | | | |
| Relationship to child | | | | | National Insurance Number: | | | | | | | | | |
| Daytime/work telephone | | | | |  | | | | | | Mobile | | |  |
| Home telephone | | | | |  | | | | Email | | |  | | |
| Home address | | | | |  | | | | | | | | | |
| Work address | | | | |  | | | | | | | | | |
| Does this parent have parental responsibility for the child? Yes □ No □ | | | | | | | | | | | | | | |
| **Photos of Parents/Carers (These will be required once your child has a space secured)**  **Mother Father**  **~~~~~~~~~~~~~~~~~~~~~~~~~**  **Other person(s) with legal contact**  *To be completed where those persons with parental responsibility are separated and an S8 Order is in place.* | | | | | | | | | | | | | | |
| Name | |  | | | | | | | | | | | | |
| Address | |  | | | | | | | | | | | | |
| Contact telephone numbers | | | | | |  | | | | | | | | |
| Relationship to child | | |  | | | | | | | | | | | |
| What are the contact arrangements that we need to be aware of? | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |

**NO ACCESS TO CHILD (if applicable)**

|  |  |
| --- | --- |
| **Full Name :** |  |
| Full address |  |
| Relationship to the child |  |
| Reason: e.g. court order or other? |  |
| Evidence seen Yes □ No □ | Copy provided Yes □ No □ |

**Emergency Contact Details (if parents are not available)**

ONLY those over the age of 16 years can be names emergency contacts. Please ensure emergency contacts are local and consent has been given.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| ***Person 1*** | | |  | | | | |
| Relationship to child | | |  | | | | |
| Address |  | | | | | | |
| Daytime/work telephone | | | |  | | | |
| Home telephone | |  | | | | Mobile |  |
| ***Person 2*** Name | | |  | | | | |
| Relationship to child | | |  | | | | |
| Address |  | | | | | | |
| Daytime/work telephone | | | |  | | | |
| Home telephone | |  | | | | Mobile |  |
| ***Person 3*** Name | | |  | | | | |
| Relationship to child | | |  | | | | |
| Address |  | | | | | | |
| Daytime/work telephone | | | |  | | | |
| Home telephone | |  | | | | Mobile |  |
| **PASSWORD for the collection of child by authorised persons:** | | | | |  | | |

**Your Child’s Attendance Requirements**

- please note we request a minimum of two days, and do not offer half days, our shortest day is 9-4pm

**Please indicate clearly the Nursery hours you request:**

Monday: ………………………………… Tuesday : ……………………………………

Wednesday : ……………………………. Thursday: …………………………………….

Friday : …………………..……………….

**Please indicate a preferred second choice:**

…………………………………………………………………………………………………………………..

**Preferred start Date**: ……………………………………………

**Earliest start Date:** ……………………………………………

**Latest Start Date:** ……………………………………………

Once your registration details have been received by the Nursery,

your child’s name will be placed on our **‘Waiting List’**

We will contact you as soon as a suitable place becomes available.

**Please note that completion of this form does not guarantee**

**your child’s space.**

Once your child is offered a place and you accept it, on admission further personal information and family details are required for our records.

If you find that you no longer need the place, please inform us as soon as possible.

Should you decide you no longer need the place we will not retain

the details on this application form (see our Privacy Notice).

A Non Refundable Deposit of £50 is required to secure your child’s space - we only require this if you are offered a space :)

**For Nursery Office use only ~**

Paperwork received: Waiting list letter:

Will the child receive education funding? **Yes/No** What type:

Details of any other funding:

Confirmation letter: