Ministry of Defence (MOD)

Attenborough Early Years Sennelager **BFPO 16**

Tel: +49 (0) 5254 9822779

fig. 2 Email: attenboroughearlyyears@modschools.org ** Website: www.attenborough.school Manager: Lynne Green (BA) Deputy Manager: Laura Gladman (Level 3)

Pegistration Form

<u>Registration Form</u>		
Child's details		
First Name:	Surname:	
Preferred Name:	Gender:	
Date of birth:	Nationality:	
Child's Address:		
Parent/Carer 1 details		
First Name:	Surname:	
Relationship to the child:	Home Number:	
Mobile Number:	Email:	
Home Address (if different to child's):		
Work Address (if applicable):	Service Number or ID Number (If applicable):	
Service Number/ID Number (if applicable):	Expected end of tour date (If applicable):	
Parent/Carer 2 details		
First Name:	Surname:	
Relationship to the child:	Home Number:	
Mobile Number:	Email:	
Home Address (if different to child's):		
Work Address (if applicable):	Service Number or ID Number (If applicable):	
Service Number/ID Number (if applicable):	Expected end of tour date (If applicable):	

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Emergency Contacts

In addition to providing parent/carer details, we ask families to provide details of **at least one** Emergency Contact. This could be family members, friends of the family, neighbours or work colleagues and superiors (e.g. Unit officers. These contacts are used if the nursery is unable to contact parents in the event of an emergency.

Emergency Contact 1 details

First Name:	Surname:
Relationship to the child:	Home Number:
Mobile Number:	Is this person authorised to collect? Yes / No

Emergency Contact 2 details

First Name:	Surname:
Relationship to the child:	Home Number:
Mobile Number:	Is this person authorised to collect? Yes / No

Authorised People

Parents must provide authorisation before nursery will release a child.

In the event that you require an authorised person to collect your child, the nursery will require the following;

- Full name of the person collecting
- Person collecting to have photo identification upon arrival at the setting

or

• If possible, the person collecting can be brought to the setting prior to the collection to meet the team.

If the setting do not have prior warning/consent/details for individuals to collect, your child will not be released.

Authorised people must be over the age of 16.

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Does your child have any allergies, dietary requirements/preferences or medical conditions? Yes / No

Health and Development

Are all of your child's immunisations up to date? Yes / No

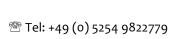
Are all your Health Visitor checks up-to-date? YES / NO

If yes, please provide details
Does your child have any additional needs or disabilities? Yes / No
If yes, please provide details
If your child has an allergy or dietary requirement, they must have a signed letter/form from the Medical Centre.
Family Details What languages are spoken within your home?
What is the main religion in your family? (if applicable)
If English is not your first language at home, will this be your child's first experience of being in an English-speaking environment? Yes / No
Are there any festivals or celebrations that your family participates in that you would like to see
acknowledged at nursery?
Are there any family members that are do not have legal access to the child?

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GP/Medical Centre details	
Name:	Telephone:
Address:	
Health Visitor details (if known)	
Name:	Telephone:
Address:	
Details of any professionals invo Worker, etc.	lved with your child; Speech and Language Therapist, Paediatrician, Socia
Name:	Telephone:
Address:	Job title:
Name:	Telephone:
Address:	Job title:
Name:	Telephone:
Address:	Job title:
Please sign to say you give perm professionals involved with you	ission for the nursery to speak with the Health visitor or any other child.
Signed	Date:

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General Parental Permissions

Emergency Care

In the event of an accident or emergency involving my child I understand that every effort will be made

	contact me immediately. Emergency services will be called as necessary and I understand that my child may be accompanied to hospital by the setting manager (or authorised deputy) for emergency reatment. understand that health professionals are responsible for any decisions on medical treatment in my absence.		
	Signed:	Date:	
	Outings Your child may be taken out of the setting as part of conducted within suitable ratios to venues on the cand the surrounding woodland area.	f their daily activities. Walks with your child amp. These include; the library, the shop, the church	
	I give permission for my child to take part in outing	5.	
	Signed:	Date:	
	Teething gel, nappy rash cream and sun cream I give permission for Attenborough Nursery staff to apply teething gel, nappy cream and sun cream (supplied by me) to my child when needed in accordance with manufacturers guidance. I understand that each application will be recorded by the responsible staff member.		
	Signed:	Date:	
Photographs and observations As part of the ongoing recording of curriculum and children's individual development records, staff regularly take photographs of the children during their play. These photographs are used for observations that are recorded in your child's learning journey and for displays within our setting and the school premises. Photos are stored on the settings computer only; photos of your child are only stored for the duration of their time with us. The settings computer is password protected and restricted to use only by nursery staff. If we seek to use your child's photos for external reasons (training/publicity), we will seek additional written consent. I give permission for my child to have their photo taken and observations to be written as per the above conditions			
	Signed:	Date:	

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Paracetamol

I give permission for staff to administer paracetamol-based products (e.g. Calpol), that is provided by me, to my child in the event of a raised temperature on the understanding that I will be making arrangements for my child to be **collected as soon as possible.**

Children's paracetamol (un-prescribed) is administered only for children with the verbal consent of parent in the case of a very high temperature. This is to prevent febrile convulsions. When a parent gives permission over the phone the staff member will record the time of the phone call on the medication form stating that verbal permission has been given and by whom. The parent will then sign the form when they collect their child.

These procedures are written in line with the current guidance in Managing medicines in Schools and Early Years Settings; the manager is responsible for ensuring all staff understand and follow these procedures

Signed: Date:

Forest School

I give permission for my child to take part in Forest School in all weathers as part of their learning and development.

I will provide the necessary clothing for all weathers so that my child can take part;

- All in one waterproof suit
- Coat
- Winter hat/summer hat
- Gloves
- Wellie boots/trainers
- Etc.

Signed:	Date:

<u>Website</u>

As part of the school website, the nursery will have its own page designed to promote our setting and the service that we provide. On occasion we may use pictures of your child involved in activities and play. Please sign if you consent to your child's photo being used on the website.

Signed:	Date:

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Signed



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nail: attenboroughearlyyears@modschools.org **Website: www.attenborough.school Manager: Lynne Green (BA) Deputy Manager: Laura Gladman (Level 3) **Parental Payment Agreement** This agreement is to be signed by the parent/carer and returned to the nursery. Parents will be provided with a copy of this agreement. I, ________, the parent/carer of _______; 1. Agree to provide at least 4 weeks' notice in writing to the Nursery Manager should I no longer require my child's/children's place. 2. Agree to provide at least 4 weeks' notice in writing is I wish to reduce or change my child's/children's sessions. 3. Understand that fees must still be paid if my child/children are absent for a short period of time. 4. Understand that if my child has to be absent for a long period of time, I will discuss this with the Manager or Deputy Manager. 5. Agree to pay my nursery fees 6. Understand that late collection without prior notice may result in additional charges. 7. Will inform the nursery if there is a change to my expected end of tour date, with as much notice as possible. Please choose the currency you would like your invoice to be processed in: Euro Please tick your preference