

### Tiny Tots Day Nursery – New Child Enrolment Form

Child's Surname:		First Name(s)	<u>):</u>		
Language(s) spoken at home	<u>e:</u>				
Date of Birth:	Religion:	]	Ethnicity:		
Home Address:					
Postcode:					
Telephone (Home):					
Mother's Surname:		First Na	ame:		
Work Address:					
Telephone (work): Mobile:					
Email Address:					
Fathers Surname:		First Na	ame:		
Work Address:					
Telephone (work): Mobile:					
Email Address:					
Third contact name:		Pł	none number:		
Address:					
Relationship to child:					
Doctors Name:		Practis	se Telephone:		
Medical History (Illnesses, o	perations, aller	gies etc):			
Immunisations (Please circle	e/Highlight the	ones the child has	s had):		
Polio Tetanus Diphti	heria MMR				
Others:					
Any special diet due to heal	th, religion, or o	culture reasons?			
Culture: Is there any religion	us traditions you	u would like the n	ursery to obser	ve?	

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### **Tiny Tots Day Nursery Terms and Conditions**

# PLEASE READ THE FOLLOWING CAREFULLY - YOU WILL BE ASKED TO SIGN THAT YOU HAVE READ AND UNDERSTOOD

I agree that the Nursery's fees will be paid monthly in advance, on the 1st of each month.

Full fees are payable 52 weeks of the year. The Nursery will be closed for two weeks in August (The exact dates will be given at the beginning of each year and with plenty of notice), the nursery will also be closed during Christmas and New Year and Bank Holidays.

I agree to give the Nursery one month's notice in writing if I wish to terminate my child's Nursery place or payment of one month's fees will be charged in lieu.

Fee increases will occur annually on the 1st of April, parents will be informed of the increase two months before.

I understand that the nursery withholds the right to terminate my child's place at any time if the staff feel verbally abused, intimidated, or feel that I am overly rude to them.

The Nursery's	s fees will be cha	rged from the	e start date you r	iave given.	
Start Date:					
Daily (8am-6ր	om): Monday	Tuesday	Wednesday	Thursday	Friday
I declare that	all the informati	on given is co	rrect and I shall	notify the nur	serv of anv

Late Charges are as follows:

changes.

- 6 pm 6.30 pm £10
- 6.30 pm and after £10 every 5 minutes
- Late payment for Child's fees £30 for the first day and £10 every day after until the fee has been paid.

I understand that the Nursery must inform the appropriate Social Services department if they feel in any way concerned with the well-being or care of my child.

I agree to my child being taken on outings or visits when accompanied by nursery staff. I agree to adhere to all the policies and procedures Tiny Tots have in place. I agree to my child being seen by a doctor/emergency service and receiving any emergency treatment necessary in case of an emergency.

I agree to my child being given Calpol medicine if my child is ill, and the Nursery feels immediate steps should be taken to make my child more comfortable.

I agree to my child's photos to be taken and displayed around the room and in my child's personal folder.



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The above data will be kept for the time that your child remains in our care. The data provided will not be shared with any third parties without your prior consent. If any of the above data changes, please keep us updated. If you wish any data to be removed at any time, please let me know.

Please sign to confirm you are agreeing to all the terms and Conditions stated in this contract.

Signed:	Parent/Guardia	an
Print Name:	Date:	





## Information Needed for 9-month, 2 year or 3-4-year funding

Eligibility Code:
Parent 1 Full Name:
NI Number:
Date of Birth:
Parent 2 Full Name:
NI Number:
Date of Birth: