



## Tansor Playgroup Registration Form 2019

Tansor Playgroup, Tansor Village Hall, Main Street, Tansor, Peterborough, PE8 5HS

Website: [www.tansorplaygroup.co.uk](http://www.tansorplaygroup.co.uk)

Phone: 07908 378862

Email: [tansorplaygroup@yahoo.co.uk](mailto:tansorplaygroup@yahoo.co.uk)

Registered Charity: 1035283 Ofsted: 220301

### Child's details

Child's first name(s) \_\_\_\_\_ Surname \_\_\_\_\_

Name known as \_\_\_\_\_

Child's full address \_\_\_\_\_

Gender \_\_\_\_\_ Date of birth \_\_\_\_\_

### Family details

Name of parent(s)/carer(s) with whom the child lives: \_\_\_\_\_

Number of children in family \_\_\_\_\_ Child's position in family (e.g. 1<sup>st</sup> child, 2<sup>nd</sup> child) \_\_\_\_\_

#### Contact details 1 (including emergency information):

Parent/carer full name \_\_\_\_\_

Relationship to child \_\_\_\_\_

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 \_\_\_\_\_

Relationship to child \_\_\_\_\_

Daytime/work telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Home telephone \_\_\_\_\_ Email \_\_\_\_\_

Home address \_\_\_\_\_

Work address \_\_\_\_\_

Does this parent have parental responsibility for the child? Yes  No

**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/l need to be aware of?

**Emergency contact details if parents are not available** *Emergency contacts must be local.*

Contact 1 - Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Daytime/work telephone \_\_\_\_\_

Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Contact 2 - Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Daytime/work telephone \_\_\_\_\_

Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

**Persons other than parent(s) authorised to collect the child** *Must be over 16 years of age. Please note that if the authorised person is not the person indicated on the daily signing in/out sheet, staff will check before releasing the child.*

Person 1 – Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Daytime/work telephone \_\_\_\_\_

Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

Person 2 - Name \_\_\_\_\_  
Relationship to child \_\_\_\_\_  
Address \_\_\_\_\_  
Daytime/work telephone \_\_\_\_\_  
Home telephone \_\_\_\_\_ Mobile \_\_\_\_\_

**About your child**

The following information will tell us a little more about your child. As your child settles with us, we will establish their starting points through observation and further conversation with you.

Does your child have previous experience of attending a childcare setting? If so, please give more details here including the name of the setting:

**Health and development**

Has your child received all scheduled immunisations? Yes  No

If no please give more details here:

Does your child have any on-going medical conditions? If so, please specify:

Are any external agencies involved with your child e.g. Paediatrician, Consultant, Dietician, Speech and Language Therapist, etc:

Is your child known to have any allergies, food intolerances, or any dietary requirements? If so, please specify:

*An Individual Health Plan and risk assessment will be completed as required, for any on-going medical conditions, known allergies, or food intolerances. These will be kept on the child's file*

Do you have any concerns regarding your child starting at playgroup?

Does your child have any special needs or disabilities?

What additional support will he/she require in our setting?

**Two year old progress check – children aged 24 – 36 months**

If your child is aged between 24-36 months, has a two year old progress check already been completed for your child? Yes  No

Setting completing check \_\_\_\_\_ Date completed \_\_\_\_\_

As per the requirements of the Early Years Foundation Stage we will complete a progress check on your child between the ages of 24-36 months. We will ask you to be involved in completing the check and will discuss it with you.

**Cultural background**

How would you describe your child's ethnicity or cultural background?

What is the main religion in your family (if applicable)? \_\_\_\_\_

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is in our setting?

What language(s) is/are spoken at home? \_\_\_\_\_

If English is not the main language spoken at home, will this be your child's first experience of being in an English-speaking environment?      Yes            No     

**Details of professionals involved with your child**

*GP*  
Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

*Health Visitor (if applicable)*  
Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

*Any other professional who has regular contact with the child*  
Name 1 \_\_\_\_\_ Role \_\_\_\_\_  
Agency \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

Name 2 \_\_\_\_\_ Role \_\_\_\_\_  
Agency \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

## General Parental Permissions

Parents/carers will be asked to review this form with a member of staff at the start of each new academic year (September) to ensure that we have an up to date record of all consents given.

### **Emergency Treatment declaration**

In the event of an accident or emergency involving my child I understand that every effort will be made to contact me immediately, but if this is unsuccessful, emergency services will be called as necessary. I understand my child may be taken to hospital for emergency treatment accompanied by a staff member, and that health professionals are responsible for any decisions on medical treatment in my absence.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **First Aid declaration**

I give permission for the Playgroup First Aiders to administer First Aid including:

Sting / bite cream                      Yes                          No   

Plasters                                      Yes                          No   

*It is imperative that parents notify staff if they have already administered medicine prior to arrival at playgroup, or if they suspect their child is unwell.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Sun Safety**

During the summer, please ensure that you have applied sun cream to your child before arrival. Please also ensure that your child has a labeled sunhat or cap.

If a child stays for a full day, we will apply sun cream at lunchtime as necessary.

I give permission for staff to apply hypoallergenic sun cream (Sunsense Ultra 500 SPF50+) supplied by Tansor Playgroup to my child as necessary.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Wet Wipes**

I give permission for staff to use wet wipes supplied by Tansor Playgroup on my child when necessary. If your child has a sensitivity to certain wet wipes, please provide a named pack of wet wipes in your child's bag. *(Nappy cream will not be supplied by the playgroup. If required it should be supplied by parents and kept in the child's bag).*

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Short walks**

Your child may be taken on short supervised walks around the village as part of the session's activities.

I give permission for my child to take part in short walks around the village. I understand that a risk assessment will have been carried out for these walks.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Photographs**

As part of the on-going recording of our curriculum and for children's individual development records, staff regularly take photographs of the children during their play. Only cameras supplied by the setting are used for this purpose, photographs taken are used for display and for your child's records within the setting. We may also record events and activities on video. Photos/videos are stored on the setting's equipment only, and we will only store images during the period your child is with us. We also sometimes use photos/videos for publishing promotional material and on our website. We will only publish photos/videos of your child with your written consent below. You can withdraw this consent at any time. If you provide consent for promotional materials we may continue to use photos/videos until you withdraw your consent.

1. I give permission for my child to have his/her photographs taken for recording curriculum and individual development records, as per the above conditions.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

2. I give permission for images of my child to be used on the Tansor Playgroup website, facebook page, prospectus, or any other promotional material.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Healthcare Professionals**

I acknowledge that information regarding my child may be shared with other healthcare professionals as appropriate e.g. health visitor, speech & language therapist.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

### **Other Childcare Settings**

I acknowledge that information regarding my child may be shared with any other childcare setting that my child attends as required.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

## Session Attendance

When would you like your child to start at Tansor Playgroup? \_\_\_\_\_

Please indicate the sessions you would like your child to attend (subject to availability):

### Core Sessions:

Monday	Tuesday	Wednesday	Thursday	Friday
AM 9am-12pm	AM 9am-12pm	AM 9am-12pm	AM 9am-12pm <i>See below *</i>	AM 9am-12pm
Lunch 12pm-1pm	Lunch 12pm-1pm	Lunch 12pm-1pm		
PM 12pm-3pm	PM 12pm-3pm	PM 12pm-3pm		

### Extended Hours:

Monday	Tuesday	Wednesday	Thursday	Friday
Early drop-off 8.30am-9.00am	Early drop-off 8.30am-9.00am	Early drop-off 8.30am-9.00am	Early drop-off 8.30am-9.00am **	Early drop-off 8.30am-9.00am
Late pick-up 3.00pm-3.30pm	Late pick-up 3.00pm-3.30pm	Late pick-up 3.00pm-3.30pm		

\* Thursday mornings are restricted to children 3yrs of age and over, whilst sessions are held in the woods at Glaphorn (September – October half-term, and after Easter – July). During the winter months these sessions are open to all ages.

\*\* Early drop-offs on a Thursday morning is **not** available when our sessions are in the woods at Glaphorn

Once we have received your registration form and registration fee (where applicable), we will contact you to confirm your child's start date and session attendance.





## Policies and procedures

I have been provided with details of Tansor Playgroup's prospectus, and have been advised that all policies and procedures are available on the Playgroup's website ([www.tansorplaygroup.co.uk](http://www.tansorplaygroup.co.uk)). I understand that in accordance with the Information Sharing Policy that there may be circumstances where information is shared with other professionals or agencies without my consent. I understand that the information given on this form will be retained in records which are maintained securely and confidentially solely for the administration purposes of Tansor Playgroup.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed name \_\_\_\_\_

Please sign below to indicate that the information given on this form is accurate and correct, and that you will notify us of any and all changes as they arise.

Parent name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

### *Record of changes:*

Change: \_\_\_\_\_

Parent name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ on behalf of Tansor Playgroup

Change: \_\_\_\_\_

Parent name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ on behalf of Tansor Playgroup

Change: \_\_\_\_\_

Parent name \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_ on behalf of Tansor Playgroup