



Registration Form

If you would like to register your child for a place at The Blue Strawberry, please complete the following and send it together with the appropriate registration fee.

Nursery Location:	
Child's Full Name:	
Home Address (including Post Code)	
Home Telephone No:	
DOB:	Gender:
Religion:	Language:
Disability / Special Educational Needs (SEN):	
Parent's / Guardian's Details	
Parent's / Guardian's Details	Parent's / Guardian's Details
First Name:	First Name:
Surname:	Surname:
Occupation:	Occupation:
National Insurance No:	National Insurance No:
Work Place and Address:	Work Place and Address:
Work Telephone No:	Work Telephone No:
Mobile Number:	Mobile Number:
e-mail:	e-mail:

Emergency Contact Details Should You Not Be Available			
Name	Relationship to Child	Home Telephone	Mobile Telephone

SECURITY

Please provide us with a generic password to keep on file for occasions when you nominate friends or family to collect your child from Nursery

PASSWORD:



MEDICAL DETAILS	
Doctors Name:	
Doctors Address:	
Doctors Telephone Number:	
Medical Conditions:	
Dietary Requirements:	
Regular Medication (including dosage)	
Allergies: (Please specify ALL signs and symptoms of a reaction and medication required)	

Please be advised that we start our settling sessions, 2-4 weeks before your child is due to start.

Start Date	
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Please indicate the sessions required using the table below

Session	Monday	Tuesday	Wednesday	Thursday	Friday
Full Day 7:30am-6:00pm					
Morning 7:30am-1:00pm					
Afternoon 1:15pm-6:00pm					
Short Day 8:30am-4:00pm					

Has your child previously attended, or do they currently attend another childcare setting?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide these details... Name of setting Name of contact Address Telephone number	
Are you happy for us to contact the setting for your child's developmental progress?	Yes <input type="checkbox"/> No <input type="checkbox"/>

Will your child be attending 2 settings while attending The Blue Strawberry?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please provide these details... Name of setting Name of contact Address Telephone number	

When children attend two settings, we have a duty of care to communicate with the second setting to ensure continuity for the child. It allows for a holistic understanding of the child's development by sharing information about their learning, behaviors, and needs across different environments, ensuring continuity in their education and providing the best possible support for the child's overall well-being

Parental Responsibility

Mothers **ALWAYS** hold parental responsibility for a child **UNLESS** the child has been adopted. If parents **ARE** married at the time of the child's birth then the father also has parental responsibility. If parents **ARE NOT** married at the time of birth but the father is on the birth certificate then both the father and mother have parental responsibility. If parents **ARE NOT** married at the time of birth and the father **IS NOT** on the birth certificate then the mother has parental responsibility.

Please indicate clearly who has Parental Responsibility for this child:

The Blue Strawberry Kids Day Care Ltd actively works to safeguard and promote the welfare of all children. We have a legal responsibility and duty of care to report any concerns to the appropriate authorities.

Would you like to have a home visit prior to your start date **Yes** **No** (optional)

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Please provide proof of DOB (e.g Birth Certificate / Passport)

Seen & Documented By:..... Date:.....

During your child's time at nursery we may be asked to share information with other professionals such as; **Health Services:** - Speech and Language; Audiology; Community Paediatrician; Community Mental Health Services; GP; Midwives; Hospitals; Physiotherapy; Disability Services; Ophthalmology; or

Support services: - Housing; Benefit Agencies; Family Support Worker; Children and Family Hubs; Education and Early Years: - Nurseries; Pre-School Settings; School Nursing. Do you consent to us sharing information regarding your child's wellbeing and child development where we feel it is necessary to do so?

Yes **No**

Please ensure that both parents sign this contract.

I have read and agree to The Blue Strawberry's terms and conditions and understand that the registration fee is not refundable. I have indicated who has Parental Responsibility for the child and agree that this true. I enclose the non-refundable deposit of £75 to secure my child's place.

Signed(Parent / Guardian)

Signed.....(Parent / Guardian)

Date.....

Date.....