

Child and parent details			
Child's legal forename			
Child's legal surname			
Child's date of birth			
Child's preferred forename/surname			
Male/female			
Country of birth			
Parent nationality?			
Do parents have British citizenship?	Yes	Ν	0
Does the child have British citizenship?	Yes	Ν	0
Are parents refugees or asylum seekers?	Refu	gee A	sylum seeker
Do parents have indefinite leave to remain? (Settlement Status)	Yes	Ν	0
Does the child have indefinite leave to			
remain (Settlement Status) Date of arrival in UK:			
Child's main address: (If the child lives at more than 1 address, please describe the weekly pattern e.g., 5 days at main address, 2 days at secondary address)			
Secondary address (if applicable)			
Do both parents have parental responsibility?	Ye	es No	
If 'No' please provide details. Copies of documentation will be required i.e., court order			
Does your child have a named social worker?	Y	'es No	
<u>If 'Yes'</u> please provide social worker name and contact number			
Child's first language		Other languages	
Religion		Child's nationality	
Child's ethnicity			
	I do not wisl		
	ethnicity to	be recorded	

Family Information						
Who lives with	the child at their n	nain ad	dres	s? (Including sil	olings	51
Name	Relationship to child		child			
Emergency contacts and pick up details <u>First person</u> to contact for emergencies This should be someone with parental responsibility who lives with the child						
Mother father/other				,		
Forename		9	Surna	me		
Mobile phone number		Other phone number				
Email address						
Second contact person for emergencies						
Relationship to child (e.g., mother,						
father, grandma, carer etc.)						
Parental responsibility			Yes	No		
i.e., named on birth certificate						
Forename		S	Surnai	me		
Mobile phone number		С	Other	phone number		
Email address						
Home address (if different from						
child) Permission to collect child			Yes	No		
	Additional contact pe	rson for	r eme	rgencies		
Relationship to child (e.g., mother,						
father, grandma, carer etc.) Parental responsibility			Yes	No		
i.e., named on birth certificate			ies			
Forename		S	Surnai	me		
Mobile phone number		C	Dther	phone number		
Permission to collect child			Yes	No		
Details of anyone who <u>specifically CANNOT</u> collect the child from nursery (e.g., by court order)				court order)		
We will require legal documentation	on / evidence to supp	ort enfo	orcing	g this for those w	ith pa	rental responsibility
Full name				Relationship to o	child	
Full name				Relationship to d	hild	
					annu	

Health and Medical Details			
Dietary requirements of child (If none, please			
state 'None')			
Details of special medical conditions, e.g., allergies, current medication, eczema, asthma,			
epilepsy			
Doctor and surgery's name			
Doctor or surgery telephone number			
Health visitor's name			
Health visitor contact number			
Dentist and surgery's name			
Are the child's Immunisations up to date?	Yes	No	
(Check your child's red book for details)			
In receipt of Disability Living Allowance	Yes	Νο	
Any identified additional need i.e., health care plan, speech and language strategies			
Name of any professionals involved i.e., Speech			
Therapist, Consultant, Physiotherapist			
Emergency Medical Consent		Conse	nt Given
If my child is involved in a serious accident while at nursery, I will be contacted immediately on the telephone numbers provided. In the event that my child		Yes	No
requires immediate treatment before I can get to the hospital, I authorise			
nursery staff to consent to emergency medical treatment on my behalf. Administering Oral Medication		l und	erstand
If your child is prescribed medication, staff can only administer this if you			_
complete a medication form. We would advise that, if possible, medication should be given at home, before and/or after nursery.		Yes	
Applying Sun Cream		Conse	nt Given
I consent for members of staff at nursery to apply sun cream to my child in hot		Yes	No 🗖
conditions. We expect parents to provide their own sun cream on hot days.		Conse	ent Given
Applying Plasters I consent for plasters to be used if necessary and confirm my child has no		Yes	
allergy to plasters.			
Changing Children			nt Given
I consent for staff to change my child's clothing if they become very wet. If my child requires nappies, I will provide nappies and wipes for changing.		Yes	No

Parental Consent		
The following page contains important consent statements which we need you to understand and		
complete. You are not required to consent to any of the below and <u>you may withdraw your consent at</u>		
any time by contacting the schoo	<u>office.</u>	
School visits and outings:		
I consent to my child being taken on off-site visits in the local	Yes 🗖 N	o П
area on foot. All visits will be risk assessed and approved by the		
Head Teacher. Qualified First Aiders will be accompanying visits.		
For trips involving transport, further permission will be sought		
from parents in advance.		
Photographs and video conse	ents	
Nottingham Nursery School will take photos and videos of your	child, please indic	ate below if you give
permission for photos and videos to be used	d for the following	,
	Yes	No
Within nursery:		
I give permission for photos of my child to be used within the		
nursery. E.g., for their pegs and in the classroom on displays or		
noticeboards.		
On social media*:		
I am happy for photos and videos of my child to be shared		
through the social media site.		
*Please note that nursery newsletter is presented in Microsoft SWAY		
format. The link is shared with nursery Federated Partner Mellers		
Primary School. By ticking yes, you agree for your child's image to be		
shared.		
School newsletter and website*:	_	
I am happy for photos and videos of my child to be shared on		
the Nursery Newsletter and Website to show updates of what		
the children have been doing.		
*Please note that nursery newsletter is presented in Microsoft SWAY format. The link is shared with nursery Federated Partner Mellers		
Primary School. By ticking yes, you agree for your child's image to be		
shared.		
In education and training materials:		
I give permission for photos or videos of my children to be used		_
for educational and training material.		
On marketing material:		
I am happy for photos and videos of my child to be used on		
Marketing materials such as leaflets advertising the nursery.		
Photographs and videos during school performances:		
I understand I cannot normally take photos/videos of my child		
inside nursery. During school performances, I will be allowed to	I understand (tick)	
take photos and videos of my own child. I understand that		
photos or videos I take must not be shared online including on		
social media.		

Office use only	Tick and annotate as completed before child attends nursery Note if not applicable
Information transferred to Arbor	
Copy of birth certificate	
Copy of court order	
Funding form completed	
Medical form completed	
Dietary requirements form completed	
In receipt of / evidence of Disability Living Allowance	
Agency documentation i.e. health care plan, child protection plan	
Funding type	
Group / session	
Named key worker	
Start Date	