

All areas of this Form should be completed and a copy of the Birth Certificate MUST be provided to allow us to process your application, in line with local Authority guidelines. Unfortunately we cannot guarantee a place until all paperwork has been processed.

	Fami	ly Details							
	Child's Forename: Middle Name:			Child's Surname:					
				Date of Birth:			Gender:		
	Addres	ss:							
	Postcode:			Home Telephone Number:					
	Parent's Full Name:								
	Parent	's Full Name:							
	Email for correspondence:		e: Password:						
	Start d	late required:							
					rged - please ensure th endar month prior to tl				
	Nurse	ery sessions re	quired (pl	ease tic	:k)				
			Full Da 7.30am - 6.0		Mini Days 7.30am - 3.30pm		Morning am - 12.30pm	Afternoon 1.00pm - 6.00pm	
	Mond	ay							
	Tuesc	lay							
	Wedn	esday							
	Thurs	day							
	Frida	y							
	Equa	lity Informatio	n						
	Ethnici	ity:	National Identity:						
	Language(s) Spoken:		Religion:						
	J								
For O		Birth Cert No:		Proof	of Address:		Date entered	on First Steps/NAMS:	



Parent/Carer Details	Parent/Carer Details					
Parent's Name	Parent's Name					
Work Title	Work Title					
Company & Address Details	Company & Address Details					
Work Tel No:	Work Tel No:					
Mobile No:	Mobile No:					
Email Address:	Email Address:					
You must give assurance that a responsible bring/collect your child from nursery	You must give assurance that a responsible adult (as well as parents) over 18 years will always bring/collect your child from nursery.					
Emergency Contacts (2)						
Relationship to child:	Relationship to child:					
Name:	Name:					
Address:	Address:					
Tel No:	Tel No:					
Sibling Details						
Name:	Name:					
D.O.B.	D.O.B.					



	Personal Medical Details							
	Child's Doctor: Address:			Health Visitor:				
				Address:				
	Tel No:			Tel No:				
	Dentist:			Tel No:				
	Does your child have any allergies?							
	Does your child have any die	etary requirem	nents?					
	Does your child suffer from	any medical c	onditions or disa	bility?	Yes	No		
	If Yes, please give details:							
	Is your child currently seeing	g any of the fo	ollowing profession	onals?				
	Health Visitor:	Yes	No	Speech & Language Therapist:	Yes	No		
	Educational Psychologist:	Yes	No	Occupational Therapist:	Yes	No		
	Paediatrician:	Yes	No	Physiotherapist:	Yes	No		
	If answered yes to the above questions please give details for each:							
	Immunisation details:							
	Please give details of any illnesses or infectious diseases your child has had e.g. chickenpox							



Consent details Consent for medical treatment I give consent for my child to be given basic medical treatment in the event of an Yes No accident whilst attending Children's Hour. In the unlikely case of a more serious emergency, I agree for the nursery to call an ambulance or arrange to take my child to the nearest hospital for treatment. I also give my consent for my child to be given emergency treatment if an accident Yes No occurs and hospital treatment is necessary. I understand that this may include local/ general anaesthetic. Parents/Carers will be contacted as soon as possible regarding any of the above circumstances. Consent for photographs or video Yes No I give my consent for my child to be photographed or videoed whilst attending Children's Hour and this information to be used for media platforms to support my child's learning and promotional purposes. Consent for outings/excursions Yes No I agree with my child participating in local outings to the park, walk, excursions etc. Consent for my child to participate in nursery activities at the local Cochno Hall. This facility will also be used in the event of an emergency evacuation. Consent for use on the internet Yes No I agree to my child accessing the internet at nursery and understand that the appropriate controls will be implemented for their protection. Consent for information sharing Yes No I agree to Children's Hour sharing information with West Dunbartonshire Council and other statutory agencies regarding my child and their education, health and well being. **Consent for communication** Yes No I agree to information being sent to me via email and other nursery software platforms e.g. First Steps and Seesaw. If joining the nursery's private Facebook page I agree to respect the privacy of others and not share material without prior permission.

Signed:	Date:

Contract



Contract between Children's Hour Nursery and the Parent/Guardian

Child's Name:

In undertaking the care and education of your child, the Nursery agrees to:

- Comply with all requirements of Registration as laid down by the Care Inspectorate
- Have in place appropriate Policies and Procedures to guide our practice
- Follow Curriculum guidelines and provide a wide range of resources, activities and experiences to stimulate and develop your child
- Ensure that First Aid qualified staff are on duty at all times and notify parents of any accidents or incidents whilst in the care of the Nursery
- · Promote a caring ethos within the nursery where all children are valued as individuals
- Encourage healthy eating and regular play to promote active and healthy lifestyles
- · Provide accurate and timely feedback on your child's development and progression at the nursery.
- Apply for the government Early Years Funding Entitlement on your behalf and for this to be in place when your child becomes eligible.

In partnership with the Nursery the Parent agrees to:

- Pay nursery fees on time and provide one calendar month's written notice if the place is no longer needed. In the unlikely event that fees are not paid timely, the nursery has discretion to apply a 5% monthly interest charge and will pass on any associated costs in pursuing the debt at a later stage.
- Provide the nursery with all the relevant information as requested and keep this updated, particularly in relation to medical and contact details.
- Provide the following items; indoor shoes, suitable outdoor clothes, complete change of clothes (in case of accidents), nappies and wipes.
- Inform the nursery of any required medication and comply with the nursery's procedure for the administration of medicine.
- · Keep your child off nursery when suffering from contagious infections; doubtful rashes, sickness or diarrhoea.
- · Notify the Manager of any injury that the child may have obtained since last in nursery.
- Always behave in an appropriate manner when on nursery premises and dealing with members of staff.

Parent's Signature:	Date:			
Parent's Signature:	Date:			
All parents responsibility for the wellbeing of this child are required to sign the application form.				

Privacy Notice: The Nursery collects personal information from parents, carers and the extended family in order to communicate and ensure the wellbeing and safety of children using our service. We have policies and procedures in place to ensure that information is secure and will only be shared in the best interests of your child or as a legal requirement. Personal information will only be retained for as long as necessary to fulfill the purpose it was collected for, to meet the requirements of the Care Inspectorate and to satisfy any legal, accounting, or reporting requirements. Full details are contained within our GDPR Policy and Procedures documentation.