



Registration Form

Personal Details

Child's Full Name:		
Child's Date of Birth:		
Home Address:		
Post code:		
Religion:		
Ethnic Monitoring:		
Child's preferred name if different from above:		
	Parent/Carer 1	Parent/Carer 1
Full Name:		
Home Address:		
Postcode:		
Telephone Number:		
Mobile Number:		
Primary Email:		
National Insurance Number:		
Profession/Employment:		
Who has parental consent / responsibility for the child?		
Primary language spoken at home.		
Additional languages spoken at home.		
Which Primary School do you hope to attend?		
Do you/your family have any special interests/skills that maybe appropriate to share with the children at pre-school (ie. music, art, dance, sport, language)		
Please provide details of other people in your household, names, ages and relationship to the child.		
Has your child got legal status? If yes, what is the legal status: social service care order, residential order, child lives with another parent, court order etc. Please state:		

Collection Permission

Please provide the details of friends/family members/Childminders who will collect your child from pre-school.

	Name	Relationship to child	Contact number
1			
2			
3			
4			

Please provide a collection password

Session Requirements

Please indicate the sessions you would prefer you child to attend.

Pavilion is a term time only preschool, operating for 38 weeks of the year.

Preschool sessions are available from Monday to Friday from 09:00-12:00 and 12:25-15:25.

You can choose morning, afternoon sessions or full days. Please note that a packed lunch must be provided from home, lunch supervision runs from 12:00-12:25. A minimum of two sessions is required.

	Monday	Tuesday	Wednesday	Thursday	Friday
am					
pm					

Ideal starting date:

Session availability will be confirmed to you on completion of registration and approval of a Pre-School/Parent agreement. A copy of our Admissions Policy is available on request.

Fees/Funding:

Please refer to our Pricing Policy. For children eligible for 3 & 4 year old nursery education funding of 15 hours for 38 weeks, Pavilion will apply for this with Liverpool City Council upon completion of a "Funding Agreement". For families eligible for an additional 15 hours of 3&4 yr old childcare funding, **you** must apply for this independently and provide Pavilion with your eligibly code before the start of term for which you are claiming. Parents who maybe using a company voucher scheme please indicate which scheme you will be using. Families eligible for 2 year old funding should indicate this upon registration.

30 Hours Eligibility Code	National Insurane Number	Name of Voucher Scheme
Please tick below		
15 hours 3&4yrs	30 hours 3&4yrs	2 year old funding

Image Consent

Photography: During your child's time at Pavilion photographs will be taken of your child by our staff team which are used to record their learning and development. Please indicate below your agreement/consent.

Type of use	I agree	I do not agree
Recording Observations (Statutory Requirement)		
Display internally		
Staff Course Work		
Pre School Photo Album. Used to demonstrate activities at pre school to staff, local authority, Ofsted, prospective parents.		
Printed Media (to promote the pre-school)		
Pre School Website		

Please note that names of children will not be used in any printed or digital media. We do not use children images/faces on any of our pre school social media sites. When leaving Pavilion you will be given your individual child's 'Learning Journey' containing all images printed.

I give my consent for the image of my child to be used at indicated above.

Signed/Date

Privacy Notice

Here at Pavilion Pre School we take your privacy seriously and we will only use your personal information in relation to your registered child's development and learning during their time at Pavilion Pre School. We are required by law to maintain records and obtain and share information (with parents, carers, other professionals working with a child, the police, social services and Ofsted) to ensure the safe and efficient management of the pre-school and to help ensure the needs of the children are met. This is a statutory requirement from Ofsted as well as Liverpool City Council Early Years Funding. This information is confidential and held securely and only accessible and available to those who have a professional right to see it.

Please ensure you have been given a copy of your **Privacy Notice** and have signed that you have read and understood this.

Signed by Staff	
Signed by Parent	

Medical Details

Name and Address of GP:	
Name of Health Visitor:	
Does your child suffer form any allergies? If yes please provide full details.	
Does your child have any medical conditions that we need to be aware of?	
Does your child have any additional needs?	
Please provide any information you may feel is relevant to your child at pre-school in regard to you/ your partners health or your family circumstances	

I consent to my child receiving any necessary emergency medical treatment (Sign/Date below)

Signed/Date

I will inform then pre school if my child is unwell or receiving medication. I agree to my child's exclusion on medical grounds when appropriate. Please refer to a copy of our Medicine and Infections Diseases Policy.

Signed/Date

I have signed a Calpol and Piriton Consent Form (copy to be attached)

YES/NO

Emergency Contact Details

	CONTACT 1	CONTACT 2	CONTACT 3
Name			
Relationship to child			
Mobile			
Work			
Home			

Other notes that may be relevant to your child's registration:

TO BE COMPLETED BY A MEMBER OF STAFF	
Birth Certificate Number	
Signature	
Date	
Receipt of £10 Registration Fee	
Eligibility for 30 hours NEF validated.	