

Contact 3: Parental Responsibility: Yes / No

Mobile:

Title:

Home telephone:

Forename:

Place of work:

Surname:

Work telephone:

Address:

Email:

Additional Info:

Post Code:

Doctors Details:

Named doctor:

Telephone:

Name of Practice:

Out of hours number:

Address:

Post Code:

Questions:

Dietary

Are there any special dietary requirements?

Yes

No

Additional Info (if applicable)

Does your child have any allergies?

Yes

No

Additional Info (if applicable)

Can Your child have fresh milk?

Yes

No

Additional Info (if applicable)

Health

Are there any special health considerations?

Yes

No

Additional Info (if applicable)

Do you consent to administer teething gel & Crystals?

Yes

No

Additional Info (if applicable)

Permission to give emergency Calpol in Nursery?

Yes

No

Additional Info (if applicable)

Do you consent to our calling an ambulance in the event of an emergency?

Yes

No

Additional Info (if applicable)

Permissions

Do you give us permission to contact other/previous settings attended for any assessments/information? Yes No

Additional Info (if applicable)

Do you give permission to share information with other health care professionals? Yes No

Additional Info (if applicable)

Do you give permission for us to apply sun cream? Yes No

Additional Info (if applicable)

Do You give permission for us to apply nappy cream (Sudocrem?) Yes No

Additional info (if applicable)

Do you give permission for your child to sleep in a pram? (nursery policy is for cots, coracle or sleep mats) Yes No

Additional info (if applicable)

Outings? (Park, Local library, out in the community) Yes No

Additional Info (if applicable)

Do you give permission for photographs to be published on brochures & posters? Yes No

Additional Info (if applicable)

Do you give permission for photographs to put on websites and social media? Yes No

Additional Info (if applicable)

Do you give permission for photographs to be published and named in newspapers? Yes No

Additional Info (if applicable)

Do you give permission for face painting? Yes No

Additional Info (if applicable)

I sign to confirm that all the above information is accurate to the best of my knowledge and agree to inform the Nursery if any details change.

Name of Parent / Carer:

Signature:

Date:

A £100 administration fee is required for all children. £50 of which will be refunded when your child's contract ends.

Here are the bank details for payment.

Kidz Day Nursery

A/c details 43525341

Sort code 20-47-61

Please use your child's name as a reference