

Ketton Early Birds Pre-School &

Out Of School Care.

Church Walk, Kedington, Suffolk. CB9 7QZ.

01440 709666.

kettonearlybirds@btconnect.com

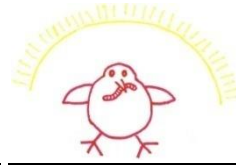
**Registration Form.**

If you would like to register your child/children at any of our childcare sessions, please fill in this form and return it to us along with the full set of child information forms. A member of staff will be in touch to confirm receipt of this form.

Please indicate on the form the sessions you are interested in. You will need a form per child.

- Parent/Carer Name .....
- Contact Telephone number .....
- Child's Name, D.O.B \* .....
- \* .....
- \* .....
- Start Date .....

	Monday	Tuesday	Wednesday	Thursday	Friday
Breakfast Club-8.00am-8.40am					
AM Pre-School-8.40am-11.40am.					
Lunch Club-11.40am-12.10pm. Please provide lunch.					
PM Pre-School-12.10pm-3.10pm. Option to bring along a lunch.					
After School Club 3.15pm – 4.15pm 3.15pm – 5.15pm 3.15pm – 5.45pm					
Holiday Club- these are run on demand which is gauged half termly.					



Ketton Early Birds - Child Information Form.

Child's name:		DOB:	
Home address:		Sex:	
		Religion:	
		Ethnicity:	
		Nationality:	
Post code:		Language:	
Home Telephone No:			
Email:			

Primary Carer name:		Primary Carer name:	
Relationship to child:		Relationship to child:	
Work Telephone:		Work Telephone:	
Mobile number:		Mobile number:	

Doctors Name:		Health Visitor:	
Address:		Address:	
Post Code:		Post Code:	
Phone number:		Phone number:	

Allergies:	
Dietary needs:	

Additional contacts:

Name:		Relationship:		Telephone:	
Name:		Relationship:		Telephone:	
Name:		Relationship:		Telephone:	

Ketton Early Birds – Medical History for .....(Name)

Did your child reach their normal development milestones?	
Are your child's immunisations up to date?	
Has your child had any illnesses that we should be aware of?	
Does your child have a health problem that could interfere with or prevent full activity? If so, what?	
Does your child have a speech problem? If yes, is your child receiving speech therapy?	
Does your child have a history of hearing problems? If yes, what is the problem?	
Does your child have a history of intermittent ear infections?	
Does your child have a history of vision impairment? If so, what?	
Is your child on long term medication? If so, what is the name of the medication?	
Is your child currently taking any medication?	
Does your child have or previously had involvement with any other health professionals? E.g. Occupational therapist, psychologist	

All about me - Pre-school Children only.

My name is.....At home I am called.....

I live with.....

My pets are.....

Previous early year's groups I have been to.....

My favourite things to do are.....

.....

.....

My favourite stories and TV programmes are.....

.....

I like to talk about.....

.....

I like to play with \*myself\_\_\_ \*my siblings\_\_\_ \*my friends\_\_\_ \*adults\_\_\_

I see and play with other children \*occasionally\_\_\_ \*once a week\_\_\_ \*2/3 times a week\_\_\_ \* everyday\_\_\_

My friends are called.....

.....

Do you know anyone already or about to come to Ketton Early Birds?

.....

.....

Illnesses I have had.....

.....

I need help to go to the toilet\_\_\_ I like to use the potty\_\_\_ I like to use the toilet\_\_\_

When I need the toilet, I say.....

Comments about toileting.....

.....

All about me – Out of school care children only.

My name is.....

I liked to be known as.....

I like to.....

.....

.....

I don't like.....

.....

.....

My hobbies are.....

.....

I like looking at or reading books about.....

.....

I like to eat and drink.....

.....

My friends are called.....

.....

## Parent/Guardian Permission Form

Please read the following statements carefully, delete as appropriate and sign to state that you understand and give your permission.

- At Ketton Early Birds, we take photos of the children to put onto the children's online learning journal, Tapestry. We also have our own website and will be adding photos etc to it.

I do/do not\*give permission for my child's photograph to be taken.

I do/do not\*give permission for my child's photo to be used on the Ketton Early Birds website.

- We have outdoor play every day in our own garden area, supervised by members of staff. We are lucky to be able to use the school playground during after school club, holiday club and occasionally in pre-school. Occasionally we will also go on walks around the village. On these occasions your child will be supervised by staff and adults to a high ratio. Before going on these walks, we will complete a risk assessment form and take a first aid box and mobile phone with us.

I do/do not\*give permission for my child to join in with outdoor play on the school playground as well as visits and walks around the village.

- In order for us to monitor and assess your child's progress, it is necessary for us to make observations and assessments. We use these for your child's Learning Journey, gauging interests and needs, weekly planning and for staff training purposes including course work. Confidentiality will be upheld at all times. These records will automatically be sent onto your child's next setting.

I do/do not\*give permission for observations and assessments on my child to be used in staff training, to be shared with other professionals where necessary and for records to be passed onto the next setting.

- Occasionally at After School club we use face/arm paints.

I do/do not\*give permission for arm/face paints to be used on my child.

- For children attending out of school care & children visiting the Nursery or school we will be escorting them to and from school. The children will be supervised by a member or members of staff depending on the adult-child ratio (1-4) or (1-8)

I do/do not give permission for my child to be escorted to and from school.

- In the summer months it may be necessary to apply your child with suncream to protect them from the sun. We would recommend that you apply the cream before coming to our setting and if they are with us longer than 3 hours then send in a labelled bottle of suncream and give to a member of staff. We would always encourage your child to be independent where possible but ensure there is adult supervision.

I do/do not give permission for a member of staff to help/supervise my child in applying suncream.

### Declaration for emergencies.

I agree to the setting leader in the provision taking the necessary steps to ensure that my child..... (name of child) receives the best and most appropriate care, attention and treatment should there be an emergency or accident in the provision or when my child is on an authorised outing. I understand that the setting leader will make every effort to inform me of any emergency or accident as soon as possible after the event but that they may have to accompany my child to hospital in the case of a serious accident in my absence. I give my permission for the setting leader in charge of the provision to authorise hospital staff to administer essential treatment until my arrival.

Signed by parent/guardian..... Date.....

..... Date.....

If you do not agree with any or all of the above declaration, please do not sign it but make your views known in the space below. The setting leader will then discuss this with you and do their best to accommodate your particular wishes.

I do not agree with the declaration and would prefer the following procedure to be followed for my child in the event of an emergency.

-----  
-----  
-----

Signed by parent/guardian..... Date.....

..... Date.....

### Please read the statements below and sign to indicate you understand and agree.

- I understand the commitment I make to regular sessions.
- I understand that fees must be paid by the 25<sup>th</sup> of the month, and that the committee will follow the payment & funding policy if fees are not paid. If I have any concerns regarding payment, I will contact either Sarah long or Lorraine Noakes.
- I will keep staff informed and updated with changes to my child/family details & needs and interests.
- I acknowledge there is **no parking on the school site**. If I drive to the surrounding area I will ensure to park safely and sensibly.
- In order to develop inclusive practice within our setting, it may be necessary to seek advice from other professionals on occasions to learn how to adapt our practice to meet individual needs. Please sign to acknowledge your agreement to this.

- I understand if my child is funded, I will receive an invoice for additional charges each month & I will discuss this with the manager if I have concerns.
- If my child has any medical, dietary or care needs, I understand this information will be shared with KEB staff and displayed in setting to ensure your child's safety.
- I understand the setting follows the Early Years Foundation Stage Nutrition guidance & I will support this with the lunch box I provide.
- I understand that I need to contact the setting if my child is going to be absent, by emailing or ringing by 10am on the day of absence (or before if known)
- As Ketton Early Birds is a Limited company every family registering with us will become a member until they cease registration.
- No use of mobile phones/electronic devices within the setting.

I have read and agree to all the above statements. If I have any questions or concerns, I will discuss these with the setting manager.

Signed Parent .....Date.....

I am legal guardian **Yes/No**

Signed Parent .....Date.....

I am legal guardian **Yes/No**

If No, is this child in the care of the local authority **Yes/No**

**Notes/Questions:**



Ketton Early Birds Policies & Procedures. Our policies can be found at [www.kettonearlybirds.co.uk](http://www.kettonearlybirds.co.uk)

<b>Policies &amp; Procedures:</b>
Achieving positive behaviour
Admissions
Attendance
Children's records
Complaints
Confidentiality & client access
Emergency lockdown
Employment
Equality & diversity
Equipment & resources
Fire policy
Fire procedure
Food & drink
Health & safety
Information sharing
Mentoring
Missing child
Mobile phone
Nappy Changing
Packed lunch
Parental Involvement
Payment & funding
PREVENT
Provider records
Safeguarding
SEN
Settling In & transition
Social networking
Student & volunteer
Transfer of records
Uncollected child
Whistleblowing

- I/We have read, understand & agree to KEB policies & procedures.
- I/We agree with how KEB will collect, store and share our personal data.
- I/We agree to keep KEB updated with changes to any personal data they hold.
- I/We continue to agree to how KEB stays in touch with us including emails, (Tapestry – preschool only) & hard copies.

**Child/children's name/names:**

.....

**Parents Name**.....

**Date**.....

**Parents signature**.....