



WHITTLESFORD 'WHITSERS'
PRE-SCHOOL PLAYGROUP CIO

REGISTRATION FORM

Registered Charity No:1165455 www.whitsers.org.uk

CHILD'S SURNAME:

CHILD'S FORENAMES IN FULL:

KNOWN AS:

DATE OF BIRTH:

ADDRESS:

HOME PHONE NUMBER:

EMAIL:

I am / am not happy (please delete) to receive information from Whitsers by e-mail

PARENTS' CONTACT DETAILS:

Mother:

Father:

Name:

Name:

Day time phone number(s):

Day time phone number(s):

Mobile phone number:

Mobile phone number:

PERSONS AUTHORISED TO COLLECT OTHER THAN PARENTS

Child will not be released from Playgroup without written consent

Name:

Telephone:

Name:

Telephone:

Name:

Telephone:

OTHER EMERGENCY NUMBERS (if different from persons authorised to collect)

Name: Telephone:

Name: Telephone:

NAME OF CHILD'S DOCTOR:

DOCTOR'S ADDRESS:

DOCTOR'S TELEPHONE NUMBER:

IMMUNISATION:

Has your child been immunised against (please circle Yes or No against each):

Diphtheria	Yes / No
Pertussis (Whooping cough)	Yes / No
Tetanus	Yes / No
Polio	Yes / No
Hib	Yes / No
Pneumococcal	Yes / No
Meningitis C	Yes / No
Measles, Mumps and Rubella (MMR)	Yes / No

IS YOUR CHILD ALLERGIC TO ANYTHING? (food, plasters, etc.) Yes / No

If Yes please specify:

DOES YOUR CHILD USE AN EPIPEN? Yes / No

HAS YOUR CHILD HAD ANY MAJOR ILLNESSES OR OPERATIONS?

HAS YOUR CHILD ANY ONGOING HEALTH PROBLEMS?

DOES YOUR CHILD HAVE ANY PERMANENT MARKS / BIRTHMARKS? Yes / No

If yes, please give details

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DOES YOUR CHILD ATTEND ANY OTHER CHILDCARE PROVIDER, E.G
NURSERY OR CHILDMINDER? Yes / No

If yes, where?.....

.....

HAS YOUR CHILD EVER ATTENDED ANY OTHER CHILDCARE PROVIDER
PREVIOUSLY THAT THEY NO LONGER ATTEND? Yes / No

If yes, where?.....

.....

SPECIAL NEEDS:

Whitsers has a Special Needs policy and co-ordinator. Does your child have any special need you wish to discuss with the staff? Yes / No

If yes, please give brief details and we will arrange for you to discuss this further with the Playgroup Leader to help us adequately plan for your child's specific needs.

CONSENTS

(please circle Yes or No as applicable)

Medical treatment:

In the event of an accident, I authorise a member of staff to administer first aid.
Yes / No

I authorise a member of staff to accompany my child for medical treatment, should they fall ill while at Playgroup. Yes / No

Comments.....

(please indicate here if you have any specific instructions governing whether your child can receive medical treatment while in the care of Whitsers Playgroup)

Outings:

I am willing for my child to go on local outings in Whittlesford (outings are accompanied by extra adult helpers). Yes / No

Food:

I give permission for my child to participate in food activities at Whitsers. Yes / No

Known food allergies:

Please list any foods you would prefer your child not to have:

Does your child drink milk? Yes / No

Sun cream:

I give permission for Whitsers staff to apply sun cream to my child when necessary.
Yes / No

Child's name:

Signed: (parent/guardian)

Date:

STATEMENT

Whitsers offers supporting services as outlined in our Prospectus. However, parents are the first and most important educators of their young children. The work of the group cannot be fully effective unless the Pre-School and parents work together in the child's interests.

Parents are asked to read, **delete where required and then sign** the statement below as an expression of this shared commitment.

Prospectus: I have read the Whitsers prospectus and accept that Playgroup will run in accordance with this and the Whitsers Policy document (available at Playgroup).

Fees: I will pay the fees in the amounts and at the time specified by the Playgroup. Please note, fees will still be payable if Whitsers is closed due to circumstances beyond our control. Once a place has been accepted, an admin fee (currently £30) will be charged and a full half-term's notice must be given to either withdraw or reduce the number of sessions.

Punctuality: I will try not to be late in collecting my child at the end of the session and will notify Whitsers staff on any occasion when this may happen. I acknowledge Whitsers has the right to charge for any extra time incurred in looking after my child outside designated session times.

Illness: I will not bring my child to Playgroup when he/she is suffering from an infectious illness, or for 48 hours after recovering from sickness or diarrhoea. I will not bring my child to a session if they have received a non-prescribed medicine within the previous 12 hours.

Code of Conduct: I agree to be courteous, co-operative and respectful, and to recognize the staff's and committee member's duty to implement the Pre-School's policies and procedures. I agree to communicate views, opinions and any concerns in a respectful manner at an appropriate time to the appropriate person.

Child's name:

Signed: (parent / guardian)

Date:

PREFERRED START AND ATTENDANCE DATES

We start children at the beginning of each school half term. These are as follows:

Autumn term - half 1 (September)	Autumn term - half 2 (November)
Spring term - half 1 (January)	Spring term - half 2 (February)
Summer term - half 1 (April)	Summer term - half 2 (June)

Please indicate your preferred start date*:

Year: **Half term:**

* Please note that your child must be at least 2½ years of age before starting at Whitsers. We operate a waiting list for each half term and will endeavour to provide you with your preferred start date where possible, in accordance with our Admissions Policy as outlined in our Prospectus.

Children are required to attend a minimum of 2 sessions (morning and/or afternoon) per week, as detailed in our Admissions Policy. Please note: Wednesday mornings are only available for children in the year before they start primary school (i.e. their preschool year).

Please tick preferred sessions (subject to sufficient demand & availability):

	Morning Session 9 - 12	Lunch Club (packed lunch needed) 12 - 1	Afternoon Session (including lunch club) 12 - 3
Monday			Not currently available
Tuesday			
Wednesday	Pre-school year only		
Thursday			
Friday			Not currently available

If your preferred days are not available, would you be willing to accept any alternative days? Yes / No

If Yes, please give details:

Please return completed application forms to: Admissions Secretary, C/O
Whittlesford Pre-School Playgroup, Memorial Hall, Mill Lane, Whittlesford, CB22 4NE
or via email to admissions@whitsers.org.uk.