



# Application Forms

**Child's Name:**

**Date of Birth:**

**Start Date:**

**Gradual Admission Date:**



*Nursery Manager: Dawn Wilde BA  
Email: dawn@tiggy-winkles.co.uk  
www.tiggy-winkles.co.uk  
Tel: 01925 444559*

# Nursery Terms and Conditions

- Age of Admittance:** 3 months to five years.
- Opening Times:** 7:30 am to 6:00 pm Monday to Friday. Christmas Eve, the nursery will close at 3.00pm
- Holidays:** We are open throughout the year except for public holidays and approximately one week at Christmas.
- Payment:** Fees are paid monthly in advance on the first of each calendar month by standing order or bank transfer. Please note that the nursery does not accept cash or cheque as payment for fees. Non or Late payment of fees may result in your child's place being withdrawn with immediate effect. Any letters/emails that are sent out regarding late payments will incur a £10.00 charge. Under normal circumstances, fees will be reviewed every April, however, we reserve the right to do this at any time. We also offer an option of weekly payments please ask for further details. We do not require a deposit to confirm your child's place however we do ask for a non-refundable admin fee of £50.
- Sickness:** Any child suffering from a temperature, doubtful rash, sore throat or discharge from the eyes or ears should be kept at home until the symptoms have disappeared. We also ask parents to ask if attending a consultation with a doctor if the child is well enough to attend nursery. If antibiotics are prescribed it is nursery policy not to admit the child until they have been taking antibiotics for a minimum of 48 hours. If a child has sickness or diarrhoea then the exclusion period is 48 hours from the last episode.
- Treatment:** In the event of your child falling ill at Nursery you or the nominated persons will be contacted. The Nursery will endeavour to make contact with the above, but in the unlikely event that contact cannot be made, we will use our judgement in assessing whether the child requires their doctor or hospital treatment. In respect of this we ask parents to sign a consent form allowing treatment at the doctors or hospital to commence without parents being present.
- Medication:** The parent of any child who requires medicine must complete a medication form in nursery before this can be administered. Medication must have clear readable labels and be in original packaging. Please refer to our Medication Policy for full details
- Notice:** If you no longer wish to maintain your place at the nursery you will be required to give four weeks in writing and full fees will be charged for the notice period. If you claim the Early Years Funding, the amount of grant that you are claiming will then be amended to reflect this. If no notice is given, the nursery will claim two weeks of grant from your child's last day, this will affect the amount of hours claimed if you are moving to another setting.
- Absence:** It is important that we are notified if your child is to be absent from nursery. Please contact the nursery before 9:00am.
- Safeguarding:** Please note that we have a duty of care to inform the Safeguarding children's Board directly, should we have any concerns regarding a child's welfare.
- Well Being:** To ensure that we are achieving the best outcome for a child's overall development, we may contact outside agencies (with your permission) and Authorities to gather or share information, assist and further support all children and families

- Birth Certificate:** We require you to share your child's birth certificate information with us and provide the original document so that we can verify this. This is to confirm your child's identity, date of birth and the parental responsibility and required as part of the grant entitlement.
- Collection:** We must insist that we are notified in advance if any other person, than the one specified on the registration form, is collecting a child from nursery. This is for the safety of the child. If we have not been notified then we will not allow the child to leave without first telephoning for your consent.
- Late Collection:** If your child is picked up after 6pm or their allocated session when the nursery closes an additional charged will be made. For the first five minutes as a good will gesture there will be no charge, for every five minutes thereafter a fee of £3.00 will be charged.
- Car Park:** Please drive carefully when parking and have consideration at all times for children and local residents. The nursery has its own car park to the rear of the nursery building which is accessed via St Peters Way. Please do not park in front of the houses near the entrance to the nursery car park.
- Clothes:** Please name your child's shoes and clothing so as to avoid any confusion when we are changing your child. We ask you to provide a complete change of clothing for your child to be kept at nursery, for this purpose the Nursery will provide a named bag.
- Baby Feeds:** For the period your child is receiving bottle feeds we ask you to provide formula milk and bottles, clearly labelled to be made as and when required. These will be stored in our milk fridge.
- Baby Change:** The nursery asks for sufficient nappies and nappy sacks to be provided. The nursery will provide baby wipes and sudocrem, or you may wish to supply a preferred alternative.
- Complaints:** If you have a complaint or concern we ask you to report it to the Nursery Manager. All matters will be dealt with swiftly, investigated and appropriate action taken. The outcome will be reported back to you as soon as possible.
- Behaviour Management:** We do not under any circumstances carry out physical punishment. If the need arises for a child's behaviour to be managed, they will have the wrong explained to them, asked to apologise and have a quiet calming period. Please refer to our behaviour Management policy
- Registration:** In order to reserve a place for your child, please complete and return the attached registration form and terms and conditions. We do not ask for a deposit to confirm the place however we do charge a £50 non-returnable admin fee payable at registration.
- Correspondence:** Please note that nursery will correspond via email whenever possible including newsletters and invoices.
- Learning Journals:** During your child's time at nursery they will be observed, photographed and filmed to record their development on their E-learning journal. The use of this data will be strictly for nursery purposes only. Only you as parents/carers, staff members, Warrington Early Years Team and Ofsted will view the contents of the journals.

**I have read, understand and accept the terms and conditions of Tiggy~Winkles Day Nursery.**

**Signed by Parent/Guardian:** ..... **Date:** .....

# Tiggy~Winkles Day Nursery Registration Form

Child's name .....

Name known as .....

Date of Birth ..... Gender .....

Birth Certificate Number:\* ..... Date of Issue.....  
*(\*Certificate to be seen by a member of management for verification)*

Was your child born premature **Yes/No\*** If yes, how many weeks .....

Disability **Yes/No\*** Access requirements.....

## Parents/Guardian

Name .....	Name .....
D.O.B .....	D.O.B .....
Address .....	Address .....
.....	.....
.....	.....
Postcode .....	Postcode .....

Does the child live at this address? <b>Yes/No*</b>	Does the child live at this address? <b>Yes/No*</b>
Does this person have parental responsibility? <b>Yes/No*</b>	Does this person have parental responsibility? <b>Yes/No*</b>
Does this person have legal access to the child? <b>Yes/No*</b>	Does this person have legal access to the child? <b>Yes/No*</b>

*\*Delete as appropriate (Evidence/documents may be needed as clarification)*

Parents names as they appear on the child's birth certificate .....	.....
Parents Occupation .....	Parents Occupation.....
Employer .....	Employer .....
Business Address .....	Business Address .....
.....	.....
Home Number .....	Home Number .....
Work Number .....	Work Number .....
Mobile Number .....	Mobile Number .....

**If you are going to be claiming for tax credits, please log your National Insurance number here:**

Name of Claimant.....	N.I Number.....
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E-Mail Address (For nursery correspondence and invoices).....

**Please supply two emergency contacts who are authorised to collect your child in your absence** *(Must be over the age of 16 years old)*

Name .....  
Relationship .....  
Address .....

Name .....  
Relationship .....  
Address .....

.....  
.....

.....  
.....

Contact Numbers .....  
.....

Contact Numbers .....  
.....

Can collect without prior notification **Yes/No\***

Can collect without prior notification **Yes/No\***

**Other contacts for collection of child**

Name .....  
Relationship.....  
Contact Number .....

Name .....  
Relationship.....  
Contact Number .....

Can collect without prior notification **Yes/No\***

Can collect without prior notification **Yes/No\***

\*Delete as appropriate

***For added security, please provide a password that all authorised collectors will be aware of***

.....

**Child's Health**

Doctor's Name .....  
Surgery address .....  
.....  
Contact Number .....

Health Visitor .....  
Based at .....  
.....  
Contact Number .....

Are you registered with a Children's Centre? If so which one.....

Any known allergies?  
.....  
.....

Any current health issues?  
.....  
.....

Any medication taken regularly?  
.....  
.....

Any special Dietary Requirements at present?  
.....  
.....

**Culture**

Ethnicity ..... Religion .....

If English is not the main language spoken at home, please state what language is

.....

Are there any celebrations within your culture that you would like us to acknowledge whilst your child is in the setting?.....

.....

**Attending additional Setting?**

Please let us know if your child has attended or is attending another setting and the reason for leaving.....

.....

**Any Other Outside Agencies?**

Are you working with, previously worked with or known to other agencies/professionals?

- |                      |                          |                              |                          |
|----------------------|--------------------------|------------------------------|--------------------------|
| Family Outreach Team | <input type="checkbox"/> | Speech and Language          | <input type="checkbox"/> |
| Home Start           | <input type="checkbox"/> | Warrington Safeguarding Team | <input type="checkbox"/> |
| Social Worker        | <input type="checkbox"/> | Other*                       | <input type="checkbox"/> |

\*Please state.....

*Please indicate below the days you wish your child to attend:*

**Full days**

**Half days**

- |           |                          |           |    |                          |    |                          |
|-----------|--------------------------|-----------|----|--------------------------|----|--------------------------|
| Monday    | <input type="checkbox"/> | Monday    | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Tuesday   | <input type="checkbox"/> | Tuesday   | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Wednesday | <input type="checkbox"/> | Wednesday | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Thursday  | <input type="checkbox"/> | Thursday  | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |
| Friday    | <input type="checkbox"/> | Friday    | am | <input type="checkbox"/> | pm | <input type="checkbox"/> |

Start Date: .....

Signed by Parent/Guardian: ..... Date:.....

(Please print name) .....

**For Office Use Only:**

<i>Registration form complete</i>		<i>Terms and conditions signed</i>	
<i>Admin Fee Received</i>		<i>GA Letter &amp; SOM Sent.</i>	
<i>Inputted on Childsplay &amp; Owl Track</i>		<i>Part Month Invoice Sent.</i>	
<i>Email imputed on Childs play &amp; Email Contact List</i>		<i>Birth Certificate Seen and checked with application</i>	