

Clanfield Pre-school  
Methodist Church Hall  
Main Street  
Clanfield  
Oxon  
OX18 2SH  
01367 810365

[www.clanfield-preschool.org.uk](http://www.clanfield-preschool.org.uk)

## **Registration Form**

Child's full name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Home Telephone No: \_\_\_\_\_ Date of Birth:

\_\_\_\_\_

Mother's name: \_\_\_\_\_ Work tel. No:

\_\_\_\_\_

Place of work: \_\_\_\_\_

Father's name: \_\_\_\_\_ Work tel. No: \_\_\_\_\_

Place of work: \_\_\_\_\_

Alternative emergency contact: 1.

\_\_\_\_\_

2. \_\_\_\_\_

Child's doctor: \_\_\_\_\_ Tel. No:

\_\_\_\_\_

Doctor's address:

\_\_\_\_\_

Main language used: \_\_\_\_\_

Any other language: \_\_\_\_\_

Nationality: \_\_\_\_\_

Religion: \_\_\_\_\_

Details of any cultural or religious observances the Pre-school practitioners should take into account when caring for the child, (e.g. Diet, dress, religious holidays etc.)

Any ongoing medical conditions – (e.g. Eczema, asthma etc.)

Does your child have any allergies?

At what stage of toilet training is your child? (E.g. In pull ups)

Favourite songs/stories/rhymes:

\_\_\_\_\_

Names of important people to the child: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Please give details of your child's development (e.g. confidence, speech etc.)

We will observe your child to assess their development, but as the child's primary educators, any information you give us before your child starts, will help a great deal- enabling us to help your child to settle as quickly as possible.

I give permission for the Pre-school to seek any necessary emergency medical advice or treatment from a qualified health professional, for my child.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ I give permission for the First aid qualified staff to give treatment to my child, including applying plasters.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ I give permission for the Pre-school to take photographs of my child in the setting, for display within the pre-school, on the website and to show development in my child's profile.

Signed: \_\_\_\_\_ Date:

\_\_\_\_\_

I give permission for my child's name, address and date of birth to be held on disc for Pre-school administration purposes. These details may also be passed onto Clanfield Primary School.

Signed: \_\_\_\_\_ Date:

\_\_\_\_\_

I give permission for Pre-school staff to apply the sun cream that I provide, to my child, as needed in sunny weather.

I have read and understood the admission policy and prospectus.

Signed: \_\_\_\_\_ Date:

\_\_\_\_\_