



**Pink Elephants Use Only:**

Birth cert/passport number: \_\_\_\_\_  
Date of issue: \_\_\_\_\_  
Date seen: \_\_\_\_\_  
Start Date: \_\_\_\_\_  
National Insurance number both parents: \_\_\_\_\_  
DOB (Both Parents) \_\_\_\_\_  
30 Hour Code \_\_\_\_\_

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£20 deposit is required with this application to secure a place, it is refundable or deductible from any invoice of your choice. Exemption: If you are applying for a Free for 2's funding place then this deposit will be waved.

**We look forward to welcoming you to the Elephant Family, please tell us a little about you.**

**All About me:**

My Name is \_\_\_\_\_

My family call me \_\_\_\_\_

My family is (Mum, dad, brother sisters etc – insert their names and ages of siblings)

\_\_\_\_\_

My pets \_\_\_\_\_

My favourite toys/activities  
are \_\_\_\_\_

\_\_\_\_\_

Things I do not like doing/playing or like eating \_\_\_\_\_

\_\_\_\_\_

If applicable please state nap times and durations

\_\_\_\_\_

**Child's Details**

First Name: \_\_\_\_\_

Surname: \_\_\_\_\_

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

\_\_\_\_\_

Date of Birth & Current Age: \_\_\_\_\_

Male/Female: \_\_\_\_\_

First Language (& 2nd if applicable) \_\_\_\_\_

Country of birth \_\_\_\_\_



**Parent/Guardian Details** (both if applicable):

**Mother**

Title:

First Name:

Surname:

Mobile Phone Number:

Home Phone Number:

Work Phone Number:

Email:

Home Address (If different to Childs)

**Father:**

Title:

First Name:

Surname:

Mobile Phone Number:

Home Phone Number:

Work Phone Number:

Email:

Home Address (If different to Childs):

**Alternative Emergency Contact Details**

(Please provide the details of at least 1 person that we can contact if we cannot get hold of you)

Name.....

Home Telephone.....

Mobile.....

Address.....  
.....

Relationship to the child:.....

Password.....

(Password will be needed for the Emergency Contact to be able to collect your child. You should only tell the password to the person you have nominated to collect your child).

I hereby confirm that the above named emergency contact has seen the nursery privacy notice.

I hereby confirm that the above named Emergency Contact has agreed to act as an emergency contact for my child in case of Emergencies.



In any event that you are late to collect please call to advise a practitioner of your expected arrival time, children who are not collected in a timely fashion will be deemed to be an 'uncollected child', as such we will follow our 'uncollected child policy'. All policies are available for you to read in reception just ask a staff member.

**Details of Child's Doctor**

Name Address Telephone

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**About your Child**

Please detail any additional/special needs or disabilities your child has or if they are currently undergoing investigations with paediatricians/specialists or even if you have any general concerns regarding certain behaviours which your child is displaying: (Please provide full details)  
External agencies (Inc. Social Services, Speech & language, Police, Crime intervention)  
Please give us full details of any previous involvement and dates. Include as much detail as possible &/or current interventions from any external team or agency.

**Medical Information**

Please detail any medical needs your child has: (please provide full details, if medication is needed an additional medication form will need to be completed)

**Allergies & Special Dietary Requirements:** (Please give full details)



Please indicate if you would like us to make a home visit before your child starts at Nursery (This is particularly useful if your child is very shy or English is not their 1st language):

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Do you have internet access at home? Yes  No

**Please indicate what days and hours you require and whether you want the nursery to provide a hot lunch: (Hot lunches are £2 per day if your child attends less than 6 hours per day)**

**Monday:** \_\_\_\_\_

**Tuesday:** \_\_\_\_\_

**Wednesday:** \_\_\_\_\_

**Thursday:** \_\_\_\_\_

**Friday:** \_\_\_\_\_

Term Time only

51 weeks of the year

Persistent late collection of my child may result in a charge of £5 for every 15minutes late, I understand that persistent late or non-payment of fees (unless previously arranged with the manager in writing) may jeopardise my child's continued place. Late payments or non-payments will also result in daily interest being added & subsequent failure to pay may result in court proceedings to recover monies due. Please note that if you first take up free entitlement then subsequently add paid for sessions, you understand that this contract is binding, and you accept the above terms.

£20 deposit is required with this application to secure a place, it is refundable or deductible from any invoice of your choice. Exemption: If you are applying for a Free for 2's funding place then this deposit will be waved.

I consent for my child to attend Pink Elephants Nursery; I understand that the pre-school has policies and procedures and that there are expectations and obligations relating to both the pre-school and myself and my child and I agree to abide by them. A full terms notice will be given in the event that I wish to change my child's pre-school. Any time taken out of the school term will still need to be paid for to keep your child's place open. (This includes, holiday or illness). Our expectation is for your child to have continued education and a high attendance level in order for us to help them progress.

The minimum uniform requirement is a polo shirt & a Jumper (£12 for the set), parents should provide outdoor coats and wellies for wet and colder months, EVERYTHING should be named. Snacks should be low salt and low sugar, NO CHOCOLATE, NO NUTS, NO SEAFOOD, grapes should ALWAYS be cut lengthways in half to prevent choking.

Where applicable you must offer your child a snack and a lunch which is both nutritious and healthy.

I give permission for a trained member of staff to administer appropriate first aid if required.



I give permission for Pink Elephants to seek any necessary medical advice or treatment in the event that my child is involved in a serious accident. I expect to be contacted immediately on the above telephone numbers.

I will contact the setting in the event my child is unable to attend for any reason. I understand that fees are still payable even for non-attendance regardless of reason. In the event of extreme weather forcing the setting to close, fees will still be payable.

Parents of children with extreme behavioural concerns will be expected to work closely with the nursery manager to help eliminate the unwanted behaviours, any parent who acts in an abusive or threatening manner towards staff will be asked to leave the premises and this may result also in forfeiture of your child's continuous provision with us.

I confirm that the information given on this registration form is correct and agree to notify the nursery staff of any changes.

I understand that the information given on this registration form is confidential, unless it is deemed necessary to be shared with external agencies &/or children's services & will only be kept for its intended purpose and not passed to any 3rd party.

I consent to photos being taken for the following reasons:

Learning journal

Advertising reasons (social media)

  

I have read and accepted the above conditions for my child attending Pink Elephants Nursery.

**Signature of Parent/Guardian/Carer:**.....

**Date:**.....