

Contact details

Father's surname

Mother's surname

Father's forename

Mother's forename

Mr Mrs Miss Ms

Child's address

Town City

Postcode..... Home telephone no.....

E-mail

Child's details

First name

Middle name

Surname

Female Male

Date of birth

Start date

Child's medical details

Any allergies.....

.....

Special dietary requirements

.....

Medical requirements

.....

Immunisation information

.....

Any additional notes

Session bookings

Start date

		Mon	Tues	Wed	Thurs	Fri
Full day	8.30 - 4.30pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning	8.30 - 1.00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	1.00 - 4.30pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fun session	4.30 - 6pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If your child's required sessions are not available, then alternative sessions will be offered

Fees

		18 to 23 months	2 to 5 years	Funded
Full day	8.30 - 4.30pm	£31.00	£30.10	£11.28
Morning	8.30 - 1.00pm	£17.40	£16.95	£ 7.52
Afternoon	1.00 - 4.30pm	£13.60	£13.15	£ 3.76
Fun session	4.30 - 6pm	£ 7.00	£ 7.00	

(A packed lunch would be required for a morning session)

Child's additional details

Position in family 1st 2nd 3rd 4th 5th 6th

Religion

Ethnicity

Nationality

Language

Ethnicity

Disability Yes No

Permission to contact / collect

FOR SECURITY PURPOSES, please choose a PASSWORD

OTHER THAN YOURSELVES, please state below who you would like us to contact in an EMERGENCY and/ or has the permission to COLLECT your child.

(All persons **MUST** be over 16 years of age)

1)
Relationship to child

Name.....

Address.....

Town

County Postcode

Mobile number

Permission to collect Yes No

Responsible for payment Yes No

Emergency contact only Yes No

2)
Relationship to child

Name.....

Address.....

Town

County Postcode

Mobile number

Permission to collect Yes No

Responsible for payment Yes No

Emergency contact only Yes No

3)
Relationship to child

Name.....

Address.....

Town

County Postcode

Mobile number

Permission to collect Yes No

Responsible for payment Yes No

Emergency contact only Yes No

Permissions

Local visits

Occasionally we like to go on little visits to local places, for example Waitrose or to post a letter. For this, we will need your written consent to permit us to take your child. We will ensure that we have high ratios of staff to children and that their safety is maintained throughout the visit.

I DO / DO NOT give permission for my child to be included in local visits. I understand that they will be supervised at all times and that I will be informed on collection, about their trip.

Parent's signature..... Date.....

Photographs

Occasionally we take photographs of the children to either keep as a momentum or to be used in promotion and website work and also sometimes students who come to the nursery, take photographs as evidence for their work. Please can you tick and sign as appropriate.

For use on our website For use in our advertising

For general nursery observation

I do not give my consent to use photographs

Parent's signature..... Date.....

Medical emergency

All of the Bouncing Beans team are qualified in First Aid. However in the event of a medical emergency the child will be assessed promptly and appropriate action will be taken. Parents will be informed immediately, however the manager or deputy manager may advise that medical aid is required before the arrival of the parent. Therefore this form gives your consent to the above.

I DO / DO NOT give permission for the Bouncing Beans team, to take necessary action should there be a medical emergency. I am aware that this may involve medical aid, for example, an experts advice or treatment at a doctor's surgery or A&E.

Parent's signature..... Date.....

Sun creams

In the summer months we ask parents to send your child to nursery with sun cream and a sun hat. We do ask that you apply cream prior to them coming into nursery, we will re-apply sun lotion with your consent. Please can you sign below.

I DO / DO NOT give permission for the staff at Bouncing Beans Children's Nursery to apply sun cream on my child during the hot summer months.

Parent's signature..... Date.....

Parent's contact details

Father's details

Company name

Town

County

Postcode

Phone number

Mobile number

Mother's details

Company name

Town

County

Postcode

Phone number

Mobile number

Relationship to child

Name

Address

Town

County

Postcode

Mobile number

Permission to collect Yes No

Responsible for payment Yes No

Emergency contact only Yes No

Doctor's details

Doctor's details

Doctor's practice

Doctor's name

Address

..... Postcode

Telephone number

Health Visitor's details

Health Visitor's name

Address

..... Postcode

Telephone number

Dentist's details

Dentist's name

Address

..... Postcode

Telephone number

Any additional notes

Fees

At the beginning of every month an invoice is given. We ask for payment by the 20th of the month. If we do not receive by this date, then a 5% charge will be added to the next months invoice. Cash or cheques are accepted. It is recommended that you write your invoice number on the reverse of the cheque. All cheques are to be made payable to: Bouncing Beans Children's Nursery.

Deposit

To reserve a place for your child at nursery a deposit of £25.00 is required once you receive confirmation of your sessions. This will be returned on your first paying invoice of when your child commences nursery. *(Please note this is non-returnable if your child does not commence nursery for the sessions allocated for them as expenses have been incurred.)*

Sessions

Full day care	8.30am - 4.30pm
Morning session	8.30am - 1.00pm
Afternoon session	1.00pm - 4.30pm
Fun club	4.30pm - 6.00pm

18 to 23 months	2 to 5 years	Funded
£31.00	£30.10	£11.28
£17.40	£16.95	£ 7.52
£13.60	£13.15	£ 3.76
£ 7.00	£ 7.00	

Termination of sessions

If for any reason you wish to remove your child from the nursery, or cancel an existing session, then one months notice in writing is required or a payment of one months fees.



I have read and understand the prospectus and the terms and procedures of the Nursery.

I would like my child to start at Bouncing Beans from We will wait to receive confirmation.
If possible two signatures are required

Parent / Carer signature..... Date Relationship to child