TENDER CARE NURSERY

Registration Form

✓	Please complete every section. If a question does not apply, write “None” or “N/A”.
☐	Tick one box where you see choices.
✎	You can type into this Word document or print and write clearly.
☎	Ask the nursery if you need help or an interpreter.

What to send with this form

☐ Child’s birth certificate
☐ Child’s red book
☐ Proof of address (bank statement, council tax or utility bill)
☐ Registration fee (all fee-paying places)

Registration fee information: The registration fee is £150 and applies to all fee-paying places. If your account is up to date, 50% of the registration fee will be credited against your final month’s fees. Please confirm payment arrangements with the nursery.

Where to send it

Nursery	Canterbury Tender Care Nursery
⌂ Address	91–93 Canterbury Road, Croydon, Surrey, CR0 3HH
Email	canterbury@tendercaredaynursery.com

1 ◷ Place needed • sessions and funding

Tell us when you would like your child to start. Requested sessions depend on available spaces and nursery staffing ratios.

Preferred start date

_____

Sessions wanted

Day	8:00am–1:00pm	1:00pm–6:00pm
Monday	☐	☐
Tuesday	☐	☐
Wednesday	☐	☐
Thursday	☐	☐
Friday	☐	☐

Funding

☐ 9 months–2 years	☐ No funding
☐ 2–3 years: 15 hours	☐ 2–3 years: 30 hours
☐ 3–5 years: 15 hours	☐ 3–5 years: 30 hours

30-hour funding: This is available to eligible working families and is subject to government household and income criteria. Please use the link below to check eligibility and apply.

Apply online: Apply for 15 or 30 hours funding

15-hour funding code						

30-hour funding code											

National Insurance number								

Date of birth DD / MM / YYYY			/			/			

Parent/carer surname

_____

2 ★ About your child • child details

Family name (surname)	
First name(s)	
Name used every day (known as)	
Date of birth	
Sex recorded at birth	☐ Female ☐ Male
⌂ Home address	
Postcode	
Local authority / council	

Identity, culture and language

Ethnic background (tick one)

☐ White British	☐ White Irish
☐ Any other White background	☐ Black African
☐ Black Caribbean	☐ Any other Black background
☐ Bangladeshi	☐ Indian
☐ Pakistani	☐ Any other Asian background
☐ Chinese	☐ Arab
☐ Mixed White / Asian	☐ Mixed White / Black African
☐ Mixed White / Black Caribbean	☐ Any other Mixed background
☐ Any other background	

If 'other', please describe

_____

Religion or belief (tick one)

☐ Christian	☐ Hindu
☐ Jewish	☐ Muslim
☐ Sikh	☐ Buddhist
☐ No religion	☐ Other

If 'other', please describe

_____

Child's first language

_____

Other languages spoken

3 ☎ Parents and carers • family contacts

Complete Parent/Carer 1 and Parent/Carer 2 where applicable.

Parent / Carer 1

Full name	
Relationship to child	
Does the child live with this person?	☐ Yes ☐ No
Parental responsibility?	☐ Yes ☐ No
⌂ Home address and postcode	
Home telephone	
Mobile telephone	
Email	
Place of work	
Work telephone / extension	
Can this person collect the child?	☐ Yes ☐ No
Collection password	

Parent / Carer 2

Full name	
Relationship to child	
Does the child live with this person?	☐ Yes ☐ No
Parental responsibility?	☐ Yes ☐ No
⌂ Home address and postcode	
Home telephone	
Mobile telephone	
Email	
Place of work	
Work telephone / extension	
Can this person collect the child?	☐ Yes ☐ No
Collection password	

4 ✎ Legal contact and safe collection

Does anyone else have legal contact arrangements with the child?	☐ Yes ☐ No

Please tell us more

_____

List any court orders or contact arrangements. Please provide copies of relevant documents.

_____

_____

Important: A person with parental responsibility can only be refused collection when a valid court order is in place and the nursery has received the document.

☎ Emergency contacts (not parents/carers)

Please give two people aged 16 or over who may collect your child. The nursery may ask for identification. Tell the nursery about any delay or change to collection.

Emergency contact 1

Full name	
Relationship to child	
⌂ Address and postcode	
Home telephone	
Mobile telephone	
Work telephone / extension	
Collection password	

Emergency contact 2

Full name	
Relationship to child	
⌂ Address and postcode	
Home telephone	
Mobile telephone	
Work telephone / extension	
Collection password	

5 ✚ Health • doctors, services and vaccinations

✚ Doctor and health visitor

Doctor's name	
GP practice	
⌂ Address and postcode	
Telephone	
Health visitor's name	
⌂ Address and postcode	
Telephone	

Other services involved

Service	Involved?	Name / contact details	Start date
Family nurse	☐ Yes ☐ No		
Social worker	☐ Yes ☐ No		
Speech and language	☐ Yes ☐ No		
Paediatrician	☐ Yes ☐ No		
Other service	☐ Yes ☐ No		

For 'other service', tell us the main service provided

_____

Vaccinations

Tick Yes or No for each vaccination.

Vaccination	Yes	No	Vaccination	Yes	No
Diphtheria	☐	☐	Tetanus	☐	☐
Hib	☐	☐	Mumps	☐	☐
Measles	☐	☐	Rubella	☐	☐
Polio	☐	☐	Whooping cough	☐	☐

Other vaccinations

_____

Has your child had any infectious diseases?	☐ Yes ☐ No

Please tell us more

_____

6 ⚠ Allergies, medical needs and diet

Does your child have any allergy or reaction?	☐ Yes ☐ No

Tick any of the 14 allergens that affect your child

☐ Celery	☐ Cereals containing gluten (wheat, rye, barley or oats)
☐ Crustaceans (such as prawns, crab or lobster)	☐ Eggs
☐ Fish	☐ Lupin
☐ Milk	☐ Molluscs (such as mussels, oysters or squid)
☐ Mustard	☐ Tree nuts
☐ Peanuts	☐ Sesame
☐ Soya / soybeans	☐ Sulphur dioxide or sulphites

Other allergy or reaction *Include anything else, such as plasters, pets, carpets or another food.*

When was the last reaction?

What signs or symptoms did your child have?

How long did the reaction last?

What prescribed allergy medicine does your child use?

Does your child have any other medical condition?	☐ Yes ☐ No

Please tell us more

Regular prescribed medicine *The nursery can only administer prescribed medicine.*

Food allergy, special diet or other dietary requirement

Any other important health information

7 ♥ Individual needs • development and daily care

Do you have any concerns about your child's development?	☐ Yes ☐ No

Please tell us more

_____

Cultural or religious needs

_____

Celebrations or festivals you would like your child to celebrate

_____

Has your child been to a nursery before?	☐ Yes ☐ No

Please tell us more

_____

Does or did your child attend a children's centre?	☐ Yes ☐ No

Please tell us more

_____

Does your child use nappies or pull-ups?	☐ Yes ☐ No

Please tell us more

_____

Does your child need a sleep during the day?	☐ Yes ☐ No

Please tell us more

_____

Home language words

If your child uses another language at home, write the words your child knows. This helps staff understand and comfort your child.

English word	Word used at home	English word	Word used at home
Mummy		Daddy	
Water		Food	
Toilet		Nappy	
Garden		Coat	
Car		Baby	
Paint		Home	
Nursery		Cuddle	

8 ★ Get to know me • your child's likes and feelings

Please answer with your child where possible. Write "None" if there is no answer.

I like playing with…

I live in a…	
I live with…	
I share a room with…	
Other children I am around often…	

My favourite foods are…

My comfort item or comforter is…

When I want something, I communicate by…

You know I am happy because I…

Things I do not like…

When I am upset, hungry or tired, I…

I am scared of…

Anything else that helps us care for me

Optional child photo

Paste or insert a recent photo here (optional)

9 ◷ Routine at home • a usual day

Tell us about meals, sleep, active play, quiet time and comfort. Add times that suit your child's day.

Time	What usually happens? (food, sleep, play, care)	Helpful details
Early morning		
Morning		
Lunch time		
Early afternoon		
Late afternoon		
Evening		
Night		

Extra routine information

_____

_____

_____

10 ✚ Permissions • medical care and outings

Tick Yes or No for each statement. You may ask the nursery to explain any item before you sign.

Medical care

Medicine note: The nursery will only give Calpol/paracetamol with parent permission, where a temperature is not reducing through normal methods. It must be prescribed for your child and you will still be asked to collect your child.

I give staff permission to…	Yes	No
Give emergency first aid	☐	☐
Seek emergency medical or dental care, including hospital treatment, when necessary	☐	☐
Administer prescribed medicine	☐	☐
Apply a plaster when needed	☐	☐
Apply SPF 30+ sun cream. I will provide sun cream, a hat and suitable summer clothing.	☐	☐

Parent/carer signature	
Print name	
Date	

Outings

Tender Care Nursery operates a strict 1 adult to 2 children ratio on outings.

I give staff permission to…	Yes	No
Take my child on local visits and outings	☐	☐
Travel with my child on public transport	☐	☐

Parent/carer signature	
Print name	
Date	

11 Permissions • photographs and information sharing

Photographs

The nursery will not use photographs for advertising or publicity more than 12 months after a child leaves. After the child leaves, pictures will only be used if they are in the annual group picture or homemade nursery books.

I give staff permission to…	Yes	No
Photograph my child and use the photos in my child's file or displays around the nursery	☐	☐
Use photographs of my child in newsletters	☐	☐
Use photographs of my child on the nursery website	☐	☐
Use photographs of my child for advertising	☐	☐

Parent/carer signature	
Print name	
Date	

Sharing information

Safeguarding: staff may share information without consent if they are worried about a child's welfare.

Permission	Yes	No
Share information about my child with other agencies, such as Speech and Language, Health Visitors or Special Educational Needs support	☐	☐

Parent/carer signature	
Print name	
Date	

12 £ Policies, terms, fees and payment

Acceptance of nursery policies

A child's place cannot be confirmed, and a child cannot be admitted, until the nursery receives this signed acceptance from the parent/carer or guardian responsible for the registration form.

☐ **I confirm that I have read the nursery policies and agree to follow them.**

Child's name	
Parent/carer name	
Parent/carer signature	
Date	

Acceptance of terms and conditions

☐ **I have read, understood and accept the nursery terms and conditions in the nursery prospectus. I agree to pay fees monthly. I understand that I must give one month's written notice to cancel or end this agreement.**

Name of person signing	
Signature	
Date	

£ Fees and bank payment

Use these bank details for the registration fee and ongoing nursery fees for all fee-paying places. If your account is up to date, 50% of the registration fee will be credited against your final month's fees. Please confirm the amount due with the nursery.

Account name	Canterbury Tender Care Nursery
Account number	68737416
Sort code	60-02-12
Payment reference	Use your child's full name

13 ✓ Final check and nursery office use

✓ Parent/carer final check

☐ I completed all relevant sections
☐ I wrote N/A where a question does not apply
☐ I attached the requested documents
☐ I signed each permission and acceptance section
☐ I checked payment requirements with the nursery

How did you hear about the nursery?

_____

Thank you for completing this form.

NURSERY STAFF ONLY — Parents/carers, please leave this section blank.

Check	Completed / details	Staff initials / date
Birth certificate provided		
Proof of address provided		
Parent/carer named on birth certificate		
Court order received, if applicable		
Funding code checked		
Actual funded category / sessions		
Actual days		
Actual start date		
Fee-paying place?	☐ Yes ☐ No	
Registration fee paid?	☐ Yes ☐ No ☐ N/A	
Date form received		
Staff name and signature		