



## CHERITON BISHOP PRESCHOOL REGISTRATION FORM

Record of Information to be completed by Parent/Carer(s).  
**Strictly Confidential.**

*\*PLEASE KEEP US UPDATED OF CHANGES TO ANY OF THESE DETAILS\**

### PERSONAL INFORMATION:

Child's name:		
Name known as for name cards etc. (if different from above):		
Date of birth:		
Home Address:		Home Tel. No.
Post code:		
Main contact e-mail address:		
Parent details	Carer 1	Carer 2
Name		
Date of birth		
NI number		
National Asylum Support service (NASS) number		
Address		
Parental responsibility?	YES/NO	YES/NO
Legal access to the child?	YES/NO	YES/NO
Home Tel No.		
Work Tel No.		
Mobile Tel No.		
Email Address:		
Who has parental responsibility if different from above?		

### EXTENDED ENTITLEMENT – for 3/4-year-olds.

If you are eligible and have already registered for this, please add your 11-digit code here.

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If you haven't already done so you can check if you are eligible and apply for your 11 digit code here - <https://childcare-support.tax.service.gov.uk/par/app/applynow>

Who to contact in an emergency: <b>Contact 1</b>	Tel. No. Mobile No.
<b>Contact 2</b>	Tel. No. Mobile No.
Name of person(s) to collect child if different from parents/carers:	
Password to allow your child to be released with person different to above:	

**OTHER INFORMATION:**

Any special diet, allergies, health problems, disabilities, special educational needs etc. the Pre-school needs to know about:	
<p>Has your child been immunised against (please tick)</p> <p>Diphtheria      <input type="checkbox"/>      Measles      <input type="checkbox"/>      Tetanus      <input type="checkbox"/>      HIB      <input type="checkbox"/></p> <p>Whooping cough      <input type="checkbox"/>      Mumps      <input type="checkbox"/>      Polio      <input type="checkbox"/>      Rubella      <input type="checkbox"/></p>	
Child's Doctor:  Tel. No.	Surgery Address:
Child's Health Visitor: Tel. No.	Has your child had their 2½ year old health visitor check? <b>YES/NO</b>
Please give details of any other agencies or professionals working with your child and their role (e.g. speech therapist, social worker):	
Please give details of any other settings or childcare previously or currently attended (including Childminder or Nanny):	
I give my permission for Cheriton Bishop Pre-school to contact them for information sharing purposes.  <b>YES/NO</b>	
What language(s) is/are spoken at home?	
What is the main religion in your family (if applicable)? (e.g. C of E, Catholic, Muslim)	
How would you describe your child's ethnicity/cultural background? (e.g. White British, Chinese, Roma etc.)	

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is at pre-school?

Which primary school will your child attend after pre-school?

Any other information you think it would be useful for pre-school to know:

*\*PLEASE KEEP US UPDATED OF CHANGES TO ANY OF THESE DETAILS\**

**AUTHORISATIONS & CONSENTS:** Please complete all the following consents: tick or delete where necessary.

**Sunscreen** -In order to reduce the risk of skin damage we will ensure children are protected before playing outside. We ask that you provide suitable sunscreen, which is labelled with your child's details at all pre-school sessions. We also ask that you provide a sunhat for use by your child when appropriate.

- I authorise pre-school staff to apply sunscreen to my child (provided by me).
- I understand that sunscreen must be a brand that does not contain any possible allergens which might cause a risk to other children (e.g. almond oil, peanuts).
- In the occasional case when my child does not have sun cream at pre-school, I authorise pre-school staff to apply a suitable high factor sun cream, provided by pre-school to my child.
- I understand that if my child does not have a sunscreen applied, he/she may not be allowed outside.

**Plasters** - It may sometimes be appropriate for our staff to administer a plaster to your child in the event of an accident.

**\*I give/do not give** permission for the staff of Cheriton Bishop Pre-school my child to apply a plaster to my child should they feel it is necessary.

**Baby Wipes** - It may sometimes be appropriate for our staff to use baby wipes for hands and faces during a session or in the event of a toileting accident.

**\*I give/do not give** permission for the staff of Cheriton Bishop Pre-school to use baby wipes for my child should they feel it is necessary.

**Paracetamol based medicine** (e.g. Calpol or Sudafed)

**\*I give/do not give** permission for Pre-school staff to administer paracetamol-based products (e.g. Calpol) to my child in the case of a raised temperature and on the understanding that I will be making arrangements for my child to be collected as soon as possible in accordance with the setting's procedures on the administration of medicines.

**Nappy Cream** - If your child is wearing a nappy and develops a rash, it may sometimes be appropriate for our staff to apply nappy cream.

**\*I give/do not give** permission for the staff of Cheriton Bishop Pre-school to use Nappy Cream for my child that I will supply, should they feel it is necessary.

**\*I give/do not give** permission for my email address to be used as a method of contact for correspondence regarding pre-school only e.g. newsletters/fundraising etc. It will not be passed on to any third party.

**Photographs/DVD Consents**-Permission is required in order that photographs or DVD recordings can be taken of your child.

**\*I give/do not give** permission for photos to be used for confidential child progress records.

**\*I give/do not give** permission for photos to be used for publicity purposes on the website or local press/parish newsletter from time to time (names will never be included).

**\*I give/do not give** permission for photos to be used for display on the pre-school notice board(s).

**\*I give/do not give** permission for my child to appear in a video/DVD recording to be used for private use by parents/carers of pre-school children (for instance the nativity performance).

**Please sign below to confirm all of the above authorisations and consents:**

Full Name of Child	
Parent/Carer Signature	

**MANDATORY CONSENTS:**

**In order for pre-school to run efficiently and to standards there are a number of necessary requirements. Please read and sign these necessary requirements below:**

a) **Medical emergency:** I give consent, in the event of an emergency, for appropriate medical advice/treatment to be sought/given for my child- e.g. qualified first aider/doctor/paramedic etc.

Please note – in the event of your child being injured or taken ill whilst at Cheriton Bishop Pre-school a member of staff would immediately attempt to contact the child’s parent/carer and if unable to make contact, would then try the emergency contacts you have nominated.

b) **Intimate care:** I give permission to the Pre-school to provide appropriate intimate care support to my child e.g. changing soiled clothing, washing and toileting.

c) **Intimate care:** I will advise the play leader of any medical complaint my child may have which affects issues of intimate care.

d) **Policies & Procedures:** I confirm that I have read and agreed all of the Pre-school’s policies and procedures.

e) **Child Records:** I understand that as part of OFSTED’s requirements records and observations will be made for your child. Records will be kept strictly confidential. Arrangements will be made to view these records if you wish.

f) **Information Sharing:** I understand that transition documents will be shared with your child’s school class teacher during their last half term at pre-school.

g) **Information Sharing:** It may sometimes be helpful to share information about your child’s development with other agencies/professionals e.g. health visitor. You will always be informed when this is happening and who this information is being shared with.

h) **Internet use:** There are times when we would like to access the internet to extend and enrich learning and play activities. Children will be monitored and supervised appropriately whilst accessing the internet. The Internet Service Provider operates a vigorous filtering system that restricts access to undesirable material.

- i) **Local short visits:** I agree that my child can join the group in visiting the school's outside play areas and the local scout field during Tuesday morning sessions.
- j) **Notice Period:** I agree to give 4 weeks' notice to the play leader before removing my child from pre-school (other than July school leavers), or I may be liable to pay any fees payable for that period.

**Please sign below to agree to all of the above mandatory consents:**

Full Name of Child	
Parent/Carer Signature	

**If you have any queries or questions or wish to know more details please feel free to discuss these with the play leader or a member of staff.**

Your personal data is being used by Cheriton Bishop Pre-school/School for the purposes of admitting your child onto school roll. We undertake to ensure your personal data will only be used in accordance with our privacy notice which can be accessed via our school website: [www.cheriton-bishop-primary.devon.sch.uk](http://www.cheriton-bishop-primary.devon.sch.uk) (Policies & Documents, GDPR - Individual Right Policy).

You have the right to withdraw your consent at any time. Should you wish to withdraw consent, please contact Christine Grist. Tel: 07977777318 or Mr Peter Halford. Tel: 01647 24817.

If you wish to exercise any of your rights under the General Data Protection Regulations, please contact our Data Protection Officer. Contact Mr Peter Halford as above in the first instance.

**OTHER PARENT/CARER HELP:**

I am willing to help with the following: (Please tick)

- |   |                          |              |                          |
|---|--------------------------|--------------|--------------------------|
| Mending/making equipment                      | <input type="checkbox"/> | Fund-raising | <input type="checkbox"/> |
| Outings                                       | <input type="checkbox"/> |              |                          |
| Speaking to the children about my job/hobbies | <input type="checkbox"/> |              |                          |
| Other (please specify)                        | <input type="checkbox"/> |              |                          |
| .....   |                          |              |                          |

**EARLY YEARS PUPIL PREMIUM REGISTRATION**

**About this form**

From April 2015 all early year's providers who deliver Government funded early education will be able to claim the early years pupil premium for three and four-year old children whose parents are in receipt of one or more of the following benefits:

- Income Support • Income-based Jobseekers Allowance • Universal Credit • Income-related Employment and Support Allowance • Support under Part VI of the Immigration and Asylum Act 1999 • The guaranteed element of State Pension Credit • Child Tax Credit (provided you're not also entitled to Working Tax Credit and have an annual gross income of no more than £16,190)

Three and four-year olds will also be eligible if:

They have been in local-authority care for 1 day or more in England or Wales.

They have been adopted from care in England or Wales

They have left care through a special guardianship order or a child arrangement order in England or Wales Working Tax Credit run-on – paid for 4 weeks after you stop qualifying for Working Tax Registering could result in extra funding for your child's early years provider.

Registering could provide up to an extra £300 for your child's preschool to fund valuable support like extra training or, resources to help raise the quality of your child's early education. We are committed to ensuring that the personal and sensitive information that we hold about you is protected and kept safe and secure, and we have measures in place to prevent the loss, misuse or alteration of your personal information.

We will use the information you provide to assess entitlement to the early years' pupil premium. We need information about you and your child, to provide the best education and support by making sure we receive all the government funding to which we and your child are entitled.

## SECTION A - FAMILY INCOME AND BENEFIT DETAILS

Is your joint family income over £16,190 per year? (Please place an X in the appropriate box

Yes

No

If you have ticked yes, you do not need to complete this section.

If you ticked no, please place an X in this box if you\* are in receipt of any of the benefits listed below

- Income support
- Income-based Jobseekers Allowance
- Income-related Employment and Support Allowance
- Universal credit
- Support from NASS (National Asylum Support Service) under part 6 of the immigration and Asylum Act 1999
- Working tax credit run-on

Please place an X in this box if you are not sure whether your joint family income is over £16,190, or whether you are in receipt of one of the benefits listed above, but you would still like us to check whether your child is eligible for the early year's pupil premium.

\*This includes those who have parental rights for the child/children named on this form

**SECTION B – ADOPTED CHILDREN, CHILDREN SUBJECT TO A SPECIAL GUARDIANSHIP ORDER OR A CHILD ARRANGEMENTS ORDER**

If your child has left care through adoption, special guardianship or child arrangements order and you would like your child to attract the early years pupil premium, you should complete the following section and attach a copy of the relevant order:

Has your child been adopted from care?

Yes  No

If you have ticked yes in the previous question, have you been granted an adoption order by the  courts? Yes  No

Did your child leave the local authority's care under a special guardianship order or a child arrangements order (formally known as a residence order?)

Yes  No

**Children who have been adopted from care or are subject to a special guardianship order or a child arrangements order.**

Eligibility will be based on your declaration that your child was formally a looked after child & on the evidence of their status e.g. a copy of the relevant order. The local authority will decide whether your child's pre-school is eligible for extra funds through the early year's pupil premium. This form & a copy of the relevant order (do not send in original documents) should be returned to your early years provider to return to the local authority to enable funding to be allocated. If you would prefer to send it directly, please send this page only to: EYPP, Early Years & Childcare Service, Room 170, county Hall, Topsham Road, Exeter, EX2 4QD or hand it in at the front desk at County Hall with the envelope marked EYPP, Early years & Childcare Service.

**SECTION C – HOW THE INFORMATION IN THIS FORM IS USED**

The information you provide in this form will be used by the council to confirm receipt of one of the listed welfare benefits. They will do this by checking out of work benefit date provided by Her Majesty's Revenue and Customs (HMRC) & Department of Work & Pensions (DWP). We would like your consent to make this check. Once this is confirmed, we can decide how much money your child's pre-school will receive. You are free to withdraw your consent so that your details are not used in future. Whether you use this scheme or not will not affect any of the benefits you may be entitled to.

**DECLARATION**

The information I have given on this form is complete and accurate. I understand that my personal information is held securely for six years and will be used only for local authority purposes.

I agree to the local authority using this information to enable my child's pre-school to claim the early years pupil premium for my child.

Signature of parent/guardian..... Date.....

**Thank you for completing this form and helping to make sure your child's early years provider is as well funded as possible.**



# Note of Interest for a Preschool Place

You can complete this form if your child is not yet old enough for you to make a preschool application.

We will send the Registration Form via email when you need to apply.

Please check on the [Citizens Portal](#) to see if you are eligible for two-year-old funding and a nursery free school meal.<sup>1</sup> Also, [check your eligibility](#) for funding if you are working as this will be needed when completing the application form.

<b>Childs Details</b>
<b>First name:</b>
<b>Last name:</b>
<b>Date of birth:</b>

<b>Siblings Name/s (brothers and sisters who come to this school)</b>
<b>First name:</b>
<b>Last name:</b>
<b>Date of birth:</b>

<b>First name:</b>
<b>Last name:</b>
<b>Date of birth:</b>

<b>First name:</b>
<b>Last name:</b>
<b>Date of birth:</b>

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<sup>1</sup> If your circumstances change you must recheck your eligibility.

<b>Parent/Guardians Details</b>	
<b>First name:</b>	
<b>Last name:</b>	
<b>Address:</b>	
<b>Phone Number:</b>	
<b>Email Address:</b>	
<b>Relationship to the child:</b>	

## Privacy and Data Protection

Your personal data is being used by us because you have showed an interest in applying for a place in our school preschool when your child is old enough. We undertake to ensure your personal data will only be used in accordance with our privacy notice which can be accessed via the school website. Please confirm that you give your consent to the School using your personal data as outlined in our privacy notice, by signing below.

<b>Applicant's signature:</b>	
<b>Date:</b>	

You have the right to withdraw your consent at any time. Should you wish to withdraw consent, please contact the school administrator on 01647 24817 or [admincheritonbishop@thelink.academy](mailto:admincheritonbishop@thelink.academy)

If you wish to exercise any of your rights under the General Data Protection Regulation, please contact the schools Data Protection Officer, Susan Stansfield, at [DPO@thelink.academy](mailto:DPO@thelink.academy)