



# Registration Form



Ofsted Registration No: 206109



**Childs Full Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Birth Certificate/Passport (checked by Office Staff)  
Ref No: \_\_\_\_\_

Male ( ) Female ( )

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

Post Code: \_\_\_\_\_ Home Telephone No: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Religious Denomination: \_\_\_\_\_

Child's First Language: \_\_\_\_\_ Additional languages: \_\_\_\_\_

Ethnic origin: \_\_\_\_\_ Nationality: \_\_\_\_\_

Parent 1 Full Name: \_\_\_\_\_

Parent 2 Full Name: \_\_\_\_\_

Parent 1 Date of Birth: \_\_\_\_\_

Parent 2 Date of Birth: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Home Address (if different from above): \_\_\_\_\_

Home Address (if different from above): \_\_\_\_\_

Place of Work: \_\_\_\_\_

Place of Work: \_\_\_\_\_

Daytime Telephone No: \_\_\_\_\_

Daytime Telephone No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Mobile No: \_\_\_\_\_

Parental Responsibility ( )

Parental Responsibility ( )

Legal Contact ( )

Legal Contact ( )

First language: \_\_\_\_\_

First language: \_\_\_\_\_

Does either parent need support to read or write English? YES /NO (if yes, please specify)

Are you? Married Divorced Single Separated Living together (please circle which applies to parents' situation)

Are there any family circumstances/relationships past, present or future which may affect your child, which we should be made aware of or any family history (medical or otherwise)?

Are there any other family members living in your household? YES/NO please state

Who should we contact in the event of an emergency other than parents? (Please state in order of preference, we require at least one other contact)

Name of contact	Relationship to child	Contact Numbers.

**Names of persons who can collect your child\***

Name of person collecting child	Relationship to child	Contact Numbers

\*Please note that should you ever need to send an alternative person to collect your child, we need to be informed at the beginning of the session and a collection form completed. In an emergency situation, a telephone call will be acceptable but the person collecting must be given the agreed password and must have proof of identity when collecting your child. We may also ask for your password and/or ID if the person collecting is not recognised by staff, even if they are on the list above.

Password: \_\_\_\_\_

**Medical Information**

Name of Child's Doctor: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Address of Practice: \_\_\_\_\_

Child's Health Visitor: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Please list immunisations/vaccinations your child has received to date, together with date given

Immunisations	Date	Immunisations	Date
<b>8 Weeks Old</b>		<b>16 Weeks Old</b>	
DTaP/PV/Hib/HepB		DTap/IPV/Hib/HepB	
PCV		PCV	
Rota		MenB	
<b>12 Weeks Old</b>		<b>12 and 13 Months Old</b>	
DTap/IPV/Hib/HepB		Hib/Men C	
Rota		PCV	
		MMR (1 <sup>st</sup> dose)	
		MenB (Booster)	

Has your child ever suffered from any of the following? (Please Tick)

Mumps	Scarlet Fever	German Measles	Measles	Chicken Pox	Convulsion	Whooping cough
TB	Swine Flu	Tetanus	Diphtheria	Polio	Fits/Febrile convulsions	Smallpox

Do you give consent for medical help to be sought in any emergency situation and for the manager on duty to authorise essential hospital treatment if you cannot be contacted? YES / NO (Please circle)

Does your child suffer from any allergies or need regular medication? YES / NO (if yes please specify)

\_\_\_\_\_

An allergy form will need to be completed and a copy of a letter from a health professional regarding the allergy provided.

Does your child have any special dietary requirements? YES / NO (if yes please specify)

\_\_\_\_\_

Meal package requested (please note we do not offer Halal meat, please circle your choice)

Full meals    Full meals without pork    Vegetarian    Pescatarian    Vegan    Packed lunch (parent provides)

Do you now or have you previously used the services of your local children's centre? YES/NO (if yes please specify which and what services were accessed)

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Is there any other information we need to know about your child? E.g. prematurity, complications or illnesses from birth

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Does your child have any additional needs with their:	
1. Hearing	Yes/No
2. Speech	Yes/No
3. Vision	Yes/No
4. Behaviour	Yes/No
5. Physical Development	Yes/No
6. Other	Yes/No
<b>Has your child had, or is currently having support from the following:</b>	
<b>Professional</b>	<b>Please state their name &amp; number</b>
Specialist Health Visitor	
Social Worker	
Speech Therapist	
Physiotherapist	
Paediatrician	
Family Support Worker	
Other:	

## Parent's Authorisation

### **Learning Journeys, Assessments & Observations**

The nursery uses Tapestry online learning journals (see <https://support.tapestry.info/parents-carers/>) and will maintain a Learning Journey for your child which will include assessments and observations of your child and group observations with other children. This may be shared with other professionals, e.g. the school your child moves on to. Email addresses from the first page of this form will be used to create logons for parents. Additional logons can be requested via the nursery office.

As part of their training, students on placement from college or university may complete child observations. Please note that staff always supervise and read over written observations to ensure no names or personal information has been used.

We are happy for staff/students to observe my child in the nursery for the purposes mentioned above.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### **Photographs/Videos**

As part of the on-going recording of our curriculum, we regularly take photographs/videos of the children whilst busy playing. These photographs are used for display work, your child's Learning Journey and displays in the nursery.

I give permission for \_\_\_\_\_ (Name of child) to have his/her photograph taken. I understand that no personal mobile phones will be used for this purpose only the nursery cameras/tablets and designated nursery mobile phone. I understand that they may appear in photos/videos in other children's learning Journeys but will not be named.

**Signed:** \_\_\_\_\_

**Date:** \_\_\_\_\_

If the photographs are required to be used for marketing or publicity purposes outside of the nursery, parents will be advised separately, and a consent form will be completed.

### Sun Safety and Cream/Nappy Cream

We agree to send our child with their shoulders covered and provide a named legionnaire style sun hat and factor 50+ suncream between the months of April and September. We will put suncream on our child before they attend nursery each day when the UV forecast is at 5 or above.

We agree to the setting applying our suncream and their own suncream should we forget to send our own or it runs out using a practical approach to application by a staff member or student.

We will send in a barrier cream if we wish it to be used at nappy changes and authorise staff to apply this wearing gloves.

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

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

### Website

We have our own website [www.lapetiteacademy.co.uk](http://www.lapetiteacademy.co.uk) which we can update with photographs, newsletters, menus and more. We use images of the children at the nursery participating in activities as an indication of nursery life for viewers of the site, please note all children will be suitably dressed. These images can be viewed by anyone who visits the site. If you are happy for your child to be featured on the website, please sign below.

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

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

### Social Media

Please note all children would be suitably dressed and photographs would only be uploaded by the management team. Please be aware that although regular checks are completed on the people following the page, we are unable to restrict who may share any of the photographs uploaded onto the page. Please sign below to authorise your child's photo/video appearing on these sites.

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

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

### Involvement of Professional Outside Agencies (e.g. Health Visitors, Speech and Language Therapists, Paediatricians, Specialist Health Visitors)

Many children will need some additional support to help them achieve their full potential, the earlier this support can be put in place, the greater the benefit to the individual child. Here at La Petite Academy, we aim to ensure that all children get the support they need to develop to their full potential.

I give permission for La Petite Academy to contact professional outside agencies to continue supporting my child's development.

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

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

### School/Nursery Transfer

I agree to La Petite Academy sharing my child's information and records with any future school/nursery that I choose for them. This includes placing their details on the School Transition Portal, which is a secure, password protected site, and transferring their Tapestry journal to the new setting.

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

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

### Medical Emergency

I give permission for a member of Management Team to administer emergency Calpol (liquid paracetamol) if my child has a high temperature of 38.5°C or above which does not reduce with other non-medical interventions. I give permission for a member of Management Team to administer Piriton (antihistamine) if my child shows any sign of an allergic reaction. Your child will only be given the appropriate dose for their age at time. Please note that the emergency Calpol (liquid paracetamol) will only be administered if your child has been at nursery for more than 4 hours. Every effort will be made to contact you for permission in advance.

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

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

### Outings

I give permission for staff to take my child on local outings within walking distance, for example the park, shops, library, schools and local care home for Boogie Beat sessions.

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

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

### Nursery Dog

I give consent for my child to interact with and feed the nursery dog. I understand that my child's hands will be washed thoroughly when they have finished touching the dog. My child does/does not have an allergy to animal fur and is/is not scared of dogs.

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

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

At La Petite Academy, we aim to celebrate a variety of religious and cultural festivals throughout the year. If you object to your child taking part in these activities, please let a manager know. We will perform a traditional Nativity play/songs around Christmastime for parents of Preschool children, please let us know if you do not wish your child to participate in this performance.

A place will be reserved for your child on receipt of a registration fee of £100 per child, £25 for the second child and each child after that whilst at least one child is still attending or due to attend nursery. You will receive your first month's invoice on your first regular session, this must be paid immediately as fees are payable one month in advance. We will then be in touch to arrange your settling in sessions. Please note that where children are attending term time only these will be in the first week of term.

## **GDPR PRIVACY NOTICE, FOR EMPLOYEES, CHILDREN ATTENDING LA PETITE ACADEMY LTD AND THEIR PARENTS**

### **RIGHTS OF ACCESS, CORRECTION, ERASURE, AND RESTRICTION**

#### **Your duty to inform us of changes**

It is important that the personal information we hold about you is accurate and current. Please keep us informed if your personal information changes during your working relationship with us.

#### **Your rights in connection with personal information**

Under certain circumstances, by law you have the right to:

- **Request access** to your personal information (commonly known as a "data subject access request"). This enables you to receive a copy of the personal information we hold about you and to check that we are lawfully processing it.
- **Request correction** of the personal information that we hold about you. This enables you to have any incomplete or inaccurate information we hold about you corrected.
- **Request erasure** of your personal information. This enables Employees or Parents to ask us to delete or remove personal information where there is no good reason for us continuing to process it. You also have the right to ask us to delete or remove your personal information where you have exercised your right to object to processing (see below).
- **Object to processing** of your personal information where we are relying on a legitimate interest (or those of a third party) and there is something about your particular situation which makes you want to object to processing on this ground. You also have the right to object where we are processing your personal information for direct marketing purposes.
- **Request the restriction of processing** of your personal information. This enables Employees or Parents, as is appropriate, to ask us to suspend the processing of personal information about you for example if you want us to establish its accuracy or the reason for processing it.
- **Request the transfer** of your personal information to another party.

If you want to review, verify, correct or request erasure of your personal information, object to the processing of your personal data, or request that we transfer a copy of your personal information to another party, please contact the manager in writing.

#### **No fee usually required**

You will not have to pay a fee to access your personal information (or to exercise any of the other rights).

#### **What we may need from you**

We may need to request specific information from you to help us confirm your identity and ensure your right to access the information (or to exercise any of your other rights). This is another appropriate security measure to ensure that personal information is not disclosed to any person who has no right to receive it.

### **RIGHT TO WITHDRAW CONSENT**

In the limited circumstances where you may have provided your consent to the collection, processing and transfer of your personal information for a specific purpose, you have the right to withdraw your consent for that specific processing at any time. To withdraw your consent, please contact the Managing Director. Once we have received notification that you have withdrawn your consent, we will no longer process your information for the purpose or purposes you originally agreed to, unless we have another legitimate basis for doing so in law.

**CHANGES TO THIS PRIVACY NOTICE**

We reserve the right to update this privacy notice at any time, and we will provide you with a new privacy notice when we make any substantial updates. We may also notify you in other ways from time to time about the processing of your personal information.

This privacy statement works in conjunction with the following policies which are accessible on the nursery website, [www.lapetiteacademy.co.uk](http://www.lapetiteacademy.co.uk) or if you require a paper copy please ask at the nursery office:

- Data Protection and confidentiality Policy
- Records Retention Policy
- Access and Storage of Information Policy

**If you have any questions about this privacy notice, please contact Carol Daly (Manager) or Jodie Hursthouse (Assistant Manager), La Petite Academy, 10-14 Highfield Road, Littleover, Derby, DE23 1DG, 01332 774413**

I \_\_\_\_\_ (Employee/Parent), acknowledge that on \_\_\_\_\_ (date), I received a copy of the Nursery’s privacy notice for Employees, Children and Parents and that I have read and understood it.

Signature .....

Name .....

**I/we agree to abide by the terms and conditions of La Petite Academy Ltd, which we have read and fully understood.**

**I/we will pay fees I owe on time. Fees are due in full on or before the 1<sup>st</sup> of each month.**

**Both parents (where applicable) MUST sign this form to confirm they have read and understood the above Terms and Conditions.**

**Parent 1 Signature:** \_\_\_\_\_

**Parent 2 Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please now return this form together with your registration fee where applicable to:**

The Manager, La Petite Academy Ltd, 10-12 Highfield Rd, Littleover, Derby, DE23 1DG

Tel: 01332 774413

Website: [www.lapetiteacademy.co.uk](http://www.lapetiteacademy.co.uk)

Email: [info@lapetiteacademy.co.uk](mailto:info@lapetiteacademy.co.uk)