



## CHILDS APPLICATION FORM

Child's Surname				
Child's First Name(s)				
Known As				
Date of Birth				
Sex		Child's NHS Number		
Religion		Ethnicity		
First Language/Home language				
Is your child left or right handed				
<b>Parent/Carer 1</b>	Relationship to the child			
	Parental Responsibility		Yes	No
Name				
National Insurance Number			D.O.B	
Address				
			Post Code	
Email Address				
Telephone Number	Home		Mobile	
Place of Work				
Job Title			Dept	
Address				
			Post Code	
Telephone Number			Ext.	
Able To Collect Child	Yes		No	



<b>Parent/Carer 2</b>	Relationship to the child			
	Parental Responsibility		Yes	No
Name				
National Insurance Number			D.O.B	
Address				
			Post Code	
Email Address				
Telephone Numbers	Home		Mobile	
Place of Work				
Job Title		Dept		
Address				
			Post Code	
Telephone Number		Ext.		
Able To Collect Child	Yes		No	

Do any other individuals have Legal contact arrangements with the child?	Yes	No
If Yes please provide details below and a copy of relevant documentation		



## Emergency Contacts Other Than Parents/Carers

	Contact No. 1	Contact No. 2
Name		
Relationship To Child		
Address		
Tel. No		
Mobile No.		
Password for Collecting child		

As security is of the utmost importance we request that you inform the nursery of any delay or changes to collection arrangements. The person collecting your child should be known to the Nursery and be aware of your chosen password.

Collection password=

## Sessions Required

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Am Session					
Pm Session					
Full Day					
Additional Requirements					
Start Date					



## Medical Details

Doctors Name:			
Address			
Tel. No.			
Health Visitor Name			
Address			
Tel No.			
Does your child have a Personal Child Health Record book (Red Book). If yes, please bring to induction visit.	Yes	No	

Are there any other services involved with the child or family?				
Family Nurse	Yes	No	Date Involvement commenced	
Name				
Contact Information and Telephone Number				
Social Services	Yes	No	Date Involvement commenced	
Name				
Contact Information and Telephone Number				
Speech and Language	Yes	No	Date Involvement commenced	
Name				
Contact Information and Telephone Number				
Any Other Service	Date Involvement Commenced			
Main Service Provided				
Main Contact Name				
Contact Information and Telephone Number				



**Immunisations – Please Tick If Your Child Has Been Vaccinated Against The Following:**

	Yes	No		Yes	No
Diphtheria			Tetanus		
Hib			Mumps		
Measles			Rubella		
Polio			Whooping Cough		
Details of Other Vaccinations					
Has Your Child Had Any Infectious Diseases?			Yes		No
If Yes Please Give Details					

**Individual Requirements and Details**

Does Your Child have Any Food Allergies or Special Dietary Requirements?		Yes		No	
Please Give Details					
Are there any medical condition or health concerns that the nursery should be aware of?		Yes		No	
Please Give Details					
Has your child any Cultural or Religious Requirements?		Yes		No	
Please Give Details Of siblings. Name and Surname		Date of Birth	Number in the family	Name of their school/setting/nursery	



## Consents

<b><u>Medical Treatment</u></b>		
<b>I hereby give consent for the staff of Little Gems Nursery to...</b>		
Administer Emergency First Aid	Yes	No
Seek Emergency medical and dental attention including hospital treatment if it is deemed necessary	Yes	No
Administer medication if prescribed	Yes	No
apply a plaster when necessary	Yes	No
apply sun cream factor 30+. I understand that it is my responsibility to provide sun cream hat and appropriate clothing during the summer months	Yes	No
Signature..... Date .....		

<b><u>Outings</u></b>		
<b>I hereby give consent for the staff of Little Gems Nursery to ...</b>		
take my child on local visits and outings	Yes	No
travel on public transport	Yes	No
Signature..... Date .....		

<b><u>Photographs</u></b>		
<b>I hereby give consent for the staff of Little Gems Nursery to ...</b>		
Photograph my child and for those photographs to be used in my child's file and displays around the nursery	Yes	No
Use photographs of my child taken at Little Gems Nursery in another child's file or diary (as a group)	Yes	No
Use photographs of my child in newsletters	Yes	No
Use photographs of my child on the nursery website	Yes	No
Use photographs of my child for advertising purposes	Yes	No
Signature..... Date .....		



## **Sharing information**

**I hereby give consent for the staff of Little Gems Nursery to ...**

Share information about my child with other agencies such as:  
Speech and Language, Social Services, Health Visitors, Special  
educational need support staff

Yes

No

Signature..... Date.....

**Please note the nursery will share information without consent if they are concerned about the welfare of the child.**

## **Little Gems Nursery Ltd**

### **Terms and Conditions**

#### **Sessions:**

Full Day Session = 8.00am – 6.00pm  
Morning Session = 9.00am - 12.00pm  
Afternoon Session =12.30pm – 3.30pm

All session requirements must be confirmed in writing.  
A minimum of 2 weeks' notice for all session changes must be given.  
Children must be registered for a minimum of 2 sessions per week.

#### **Shift Patterns**

The nursery can accommodate some shift patterns subject to availability of places but for us to manage this irregular booking pattern, sessions must be confirmed 1 week in advance in writing.

#### **Fee Payment:**

Child care fees must be paid one month in advance by the first day of the month.

Payment is required by Standing Order, Internet/Telephone banking or card payment. Details of Little Gems Nursery Ltd Bank account is available on request for internet and telephone banking payments

You will be issued with an invoice each month.



### **Holidays:**

The nursery will be closed for one week at Christmas & all Bank Holidays.

There is an entitlement to two weeks holiday per year with a reduction in fees of 50%. during this time, the allocation of days will depend on the number of sessions taken per week. Holiday requests must be received prior to the month of the holiday.

Holiday entitlement is calculated on an annual basis from the child's start date, based on the amount of sessions attended per week. (In the case of shift patterns this will be based on the average number of weekly sessions for the previous month)

### **Sickness/ Absence:**

Children who have, or develop, an infectious illness must be excluded from nursery for a minimum of 48hours.

This is in the best interest of the child and the other children and complies with regulations set out by the Environmental Health Department. The nursery must be notified of all absences.

**Sickness or absence from Nursery does not qualify for a reduction in fees.**

### **Notice:**

One month's written notice, by either party is required to terminate a child's place at nursery. One month's fees in lieu of notice will be charged.

### **Family Discounts:**

Where two or more children from one family attend the nursery for three days or more per week, the oldest child will be eligible for a 10% discount in their monthly fees.

### **Clothing and Personal Items:**

The Nursery cannot accept responsibility for loss or damage to personal items or clothing.

Parents should supply sufficient clothing for their child 's daily needs and a spare set of clothing in case of accidents.

Sun cream and sunhats should be supplied in the warmer months. Suitable footwear and clothing for outdoors must also be provided.





**Car Parking:**

There are designated parking bays for dropping off and collecting children. If these bays are full please ensure that you park your car carefully. Under no circumstances should any car be left parked in an unsuitable manner that could cause danger to children or to the public.

**AGREEMENT**

I agree to comply with the terms and conditions set out by Little Gems Nursery Ltd.

Signed.....Date.....

Name.....

Please bring these documents along:

- Child's Birth Certificate and Red Book
- Child Tax Credit award/benefit Letter and any other proof of income
- Proof of Address within the last 3 month and Parents proof ID (passports)

**Documents Required from Parents**

- Child's Red Book
- Child's Birth Certificate
- Parents proof of ID
- Parents Proof of Address Last 3 month
- Parents Proof of Income



<b>Fees for Babies and under two's</b>			
Hourly Rate	Session Rate (4hours)	Full Day Rate (8Hours)	Weekly Rate
£7.50 Per Hour	£30 Per Session	£40 Full Day	£175 Per Week

<b>Fees for Two Year Olds</b>			
Hourly Rate	Session Rate (4hours)	Full Day Rate (8Hours)	Weekly Rate
£7 Per Hour	£28 Per Session	£38 Full Day	£160 Per Week

<b>Fees For 3-5 Years Olds</b>			
Hourly Rate	Session Rate (4hours)	Full Day Rate (8Hours)	Weekly Rate
£6.50 Per Hour	£26 Per Session	£36 Full Day	£150 Per Week

**Little Gems Nursery Ltd**  
**43 Whitmore Road, Birmingham B10 0NR**  
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**Opening Hours 8am – 6pm Monday – Friday**