



Pre-School & Out of School Club

Registration & Booking Form

Child's Details

Name of Child: _____ Date of Birth: _____

Female Male

Ethnic Origin: _____

First Language: _____ Religion: _____

Parent's / Guardian's Details

Parent /Guardian 1: _____ Parent/Guardian 2: _____

Relationship to child: _____ Relationship to Child: _____

Address: _____ Address: _____

Postcode: _____ Postcode: _____

Home No: _____ Home No: _____

Work No: _____ Work No: _____

Mobile No: _____ Mobile No: _____

email: _____ email : _____

Employer: _____ Employer: _____

Please indicate who has parental responsibility for your child: _____

Medical Details

Doctors name: _____ Telephone No: _____

Surgery Address: _____ Immunisations up to date: Yes No

Postcode: _____ Allergic to plasters Yes No

Allergies: _____ Special Dietary Req: _____

Permission given to seek any necessary medical advice or treatment (inc transport to the doctors surgery or hospital) if your child should require any emergency treatment while attending Sunflowers Pre-School & Out of School Club Yes No

Signature: _____ Date: _____

Sunflower Pre-School & Out of School Club, Headlands Road, Welford on Avon, Cv35 8ER

Telephone 01789 751003 or 07738 707781

www.sun-flowers-pre-school.org.uk

sue@sunflowers-pre-school.org.uk



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Emergency Contacts

Please indicate the main emergency contact numbers for your child

Contact 1: _____ Contact 2: _____

Relationship to child: _____ Relationship to Child: _____

Home No: _____ Home No: _____

Work No: _____ Work No: _____

Mobile No: _____ Mobile No: _____

Contact 3: _____ Contact 4: _____

Relationship to child: _____ Relationship to Child: _____

Home No: _____ Home No: _____

Work No: _____ Work No: _____

Mobile No: _____ Mobile No: _____

Collection Details

Persons permitted to collect your child from Sunflower Pre-School & Out of school Club

Contact 1: _____ Contact 2: _____

Relationship to child: _____ Relationship to Child: _____

If on occasion you require any other person(s) to collect your child from Sunflower Pre-school & Out of School Club you will need to nominate a password to assist with identification.

Password: _____

Other Permissions

Sharing of Information

I hereby give consent for information to be shared in relation to child protection and safeguarding Yes No

Outings

I hereby give consent to my child participating in all activities, including outings and visits, some of which may include travelling by transport hired by Sunflowers (all of which will have relevant insurance and prior notice given) Yes No

Photographs / Videos

I hereby give consent for my child to appear in photographs, which may be used in the media in connection with the nursery and advertising purposes; including being observed from time to time by students and appearing in photographs / videos (where relevant) for the purpose of their studies, after approval from the nursery manager. Yes No

Sun Cream Protection

I hereby give consent for the staff to apply Boots Factor 50 sun protection cream to my child should I not provide my own. Yes No

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Place Requirements

Sessions	Timings	Mon	Tue	Wed	Thu	Fri	Term Time Only	
Pre-School Full day	8.00am – 6.00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	<input type="checkbox"/>
Pre-School am	8.00am – 1.00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No	<input type="checkbox"/>
Pre-School pm	1.00pm – 6.00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
School Day	8.45am – 3.15pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Breakfast Club	8.00am – 8.45am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
After School – Short session	3.15pm – 4.30pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
After School – Full session	3.15pm – 6.00pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Free Nursery Education Funded (NEF) Places								
3 Hour - am	8.45am – 11.45am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
3 Hour - pm	12.15pm – 3.15pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Other Sessions Required – Please detail		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Drop off details

School: _____ Class: _____

Collection Details

School: _____ Class: _____

Preferred Start Date: _____ Settling in session 1: _____

Settling in session 2: _____ Settling in session 3: _____

A non refundable Registration fee of £35 is payable for all Pre-school Children on submission of the completed Registration & Booking forms this guarantees your child's place at Sunflowers and also includes up to 3 settling in visits varying at a mutually agreeable time prior to your child's start date with Sunflowers.

If your child only attends the NEF funded sessions no registration fee require but registration forms must be completed.

A non refundable Registration fee of £20 is payable for all Out of School club Children on submission of the completed Registration & Booking form this guarantees your child's place at Sunflowers.

Registration Fee – Pre-school paid

Registration Fee – Out of School paid

A deposit to the sum of your child's first week's fees will be required before your first settling in visit. All fees are payable on the 1st of every month – your deposit will deducted from your first months fees.

Deposit paid Amount paid _____

Acceptance of Terms & Conditions

This contract is between Sunflowers Pre-School & Out of School Club and the undersigned Parents / Guardian's of the child detailed above. I / We have read and understand the terms and conditions of accepting a place at Sunflowers Pre-School and Out of School Club

Parent Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Signed for and on behalf of Sunflowers Pre-school & Out of School Club

Signature: _____ Date: _____

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Agreement for payment of fees

Child's name: _____

Person responsible for payment of fees

Name: _____

Address: _____

Postcode: _____

Home No: _____

Work No: _____

Mobile No: _____

Weekly fee amount: _____ Monthly fee amount: _____

Preferred payment method

- Direct Debit Sort code **20-23-55**, Account number **83470628**, please put your child's name as reference
- Cheque Payable to - Sunflower Pre-School Ltd
- Cash
- Childcare Vouchers Please state Provider Name: _____
- Other please give details: _____

I hereby agree to pay the fees for the above child on the 1st of each month in accordance with the terms and conditions of Sunflowers

Signature: _____ Date: _____

Office Use

Settling In Visits Arranged Dates _____ & _____

Entered onto Computer Date _____ Reference Number _____

On Registers Terms & Conditions given First Invoice Generated

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