|  |  |
| --- | --- |
| **Child’s legal name:** | **D.O.B:** |
| **Name known as:** | **Male/ Female:** |
| **Childs ethnicity:** | **Language spoken at home:** | **Child’s religion:** |
| **Details of those who live with the child.** (Please note person 1 will be the first point of contact) |
| **1, Name** | **Relationship to child** | **Does this person have parental responsibility? YES/NO** |
| **2, Name** | **Relationship to child** | **Does this person have parental responsibility? YES/NO** |
| **Family address** | **Home telephone** |  |
| **Mobile of person number 1** |  |
| **Work telephone for person 1** |  |
| **Email for person number 1** |  |
| **Mobile of person number 2** |  |
| **Work telephone for person 2** |  |
| **Email for person number 2** |  |

**Please select the days you would like your child to attend nursery?**

**(Please do not amend the timings on this form)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | **Friday****(only open until 17.00)** |
| 08.00 – 17.00 |  |  |  |  |  |
| 08.00 – 17.30 |  |  |  |  |  |
| 08.00 – 16.00 |  |  |  |  |  |
| 09.00 – 17.00 |  |  |  |  |  |
| 09.00 – 17.30 |  |  |  |  |  |

**When would you like your child to start nursery? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Thank you for registering your child for a place in our care. You will receive a letter to acknowledge that we have received your application. We will be in contact with you verbally and in writing when a place is available and to discuss your child’s sessions. The required deposit to reserve a place for your child is £75, £25 is and administration fee and £50 will be refunded from your last bill. Please note all deposits and administration fees are non-refundable once received. You must give 28 days’ notice in writing to withdraw your child from Nursery or change their days.

Failure to pay fees will result with the Finance Department contacting a Debt Agency, this will result in costs being added to the final outstanding balance.

**Increases to Fees**

**TNB endeavour to keep childcare fees to a minimum for our families, however there are times when the fees must be increased. Fees are generally increased in line with the annual rise in the national living wage which is a statutory requirement that TNB must adhere to. The rise in fees is determined by the extent of the government increment, where possible TNB try to absorb some of the additional cost which allows the increase to the hourly rate to be as minimal as possible. Please bear in mind that TNB have no control over the statutory raise in the national living wage. Where possible a minimum of one months’ notice is given before an hourly fee rate change.**

**To best help us help your child and your family please complete the form below.**

Are any of the following in place for the child?

Was your child receiving SEN support in a previous setting? **Yes/No** (delete)

My support plan? **Yes/No** (delete)

Education Health and Care Plan (My Plan)? **Yes/No** (delete)

Has a CAF been opened for your child? **Yes/No** (delete)

What special support will he/she require in our nursery?

|  |
| --- |
|  |

Is there any other information that you feel you would like to share about your child?

|  |
| --- |
|  |

**Names of any other professionals involved with child**

|  |  |  |  |
| --- | --- | --- | --- |
| Name 1 |  | Role |  |
| Agency |  | Telephone |  |
| Name 2 |  | Role |  |
| Agency |  | Telephone |  |
| Name 3 |  | Role |  |
| Agency |  | Telephone |  |

**Signed by**

Parent 1\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent 2\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_