





<b>Password</b>	
Please provide a password that you would like us to use if your child is collected by someone different.	

<b>Medical Information</b>	
Name Of Doctor	
Doctors surgery and address	
Telephone Number of surgery	

Please give details of any medical or health needs e.g. inhalers, allergies, special dietary requirements, medical conditions etc

Name of Health Visitor & Address Telephone number	
Has your child had a 2 year old check with a health visitor	YES/NO

Vaccinations received (please tick)	Diphtheria	Measles
	Whooping Cough	Mumps
	Tetanus	Rubella
	Polio	
	Hibs	MMR

I give my consent for information and documentation to be shared with my health visitor, including the assessment for the 2 year old check. We have regular meetings with health visitors to support you and your family e.g. speech therapy referral.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**First Aid**

In the event of an emergency I/We give my/our consent for my/our child to be given medical/ first aid treatment and/ or to be taken to hospital

Signed \_\_\_\_\_ Date \_\_\_\_\_

**To Administer Paracetamol Suspension**

In the event of an emergency I/We give my/our consent for my/our child to be given Paracetamol Suspension

Signed	Date
<b>Application of creams</b>	
I give my permission for creams (supplied by me) to be applied by the children's centre staff as required e.g. sun cream, nappy cream	
Signed	Date
<b>Application of Face Paint</b>	
I give my permission for Face Paint to be applied by the children's centre staff as required.	
Signed	Date

<b>Special Needs:</b>
Newdale Nursery has Special Educational Needs Policy.
Does your child have any special needs that you would like to discuss with staff?

<b>NOTIFICATION OF ILLNESS</b>
Newdale Nursery must be notified if your child is unwell and will not be attending. If the condition is an infectious illness the nursery must be made aware.
Staff have the right to exclude a child if it is deemed necessary to prevent infection of others.
<b>I will notify the nursery if my child is unwell and understand that the staff can exclude my child if deemed necessary</b>
<b>Parent/Carer Signature Required:</b>
<b>Date:</b>

## Child Protection

As childcare professionals, the staff at Newdale Nursery have a duty to report any suspicions of abuse or neglect of children in their care to the Safeguarding Helpdesk.

I understand that if the staff at Newdale Nursery suspects that any child in their care may have been abused or neglected, they have a duty to report to the Safeguarding Helpdesk.

Parent/Carer Signature Required:

Date:

### Social care

If your child has a social care worker for any reason, please provide their name, contact details and provide details of their involvement in the case. Please note: If your child has a protection plan, please state this below but you should not disclose specific details about this on this form.

### Support

Has your child been referred for hearing loss/sight/other? Please provide details below

Are you receiving any other help or support? e.g. child and family services, home start, integrated children's services, princess royal assessment group. Please provide details below

### Photography Permission

I/We give my/our permission for photographs to be taken of my child to use

For use within the centre (e.g. profiles, displays, observations)	Yes / No
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For use within the centre's marketing (e.g. prospectus)	Yes / No
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For use within the external media (e.g. Shropshire Star)	Yes / No
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For use on nursery Facebook/Twitter/school website	Yes/No
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When taking photographs of my child at the nursery, where these contain other children who attend the nursery I promise that these are for my personal use and agree not to publish on the internet and social websites, without first obtaining explicit agreement from the parents/ guardians of the children included in the photograph.

Signed

Date

Special events, other people taking photos of my child i.e. Christmas, School photographs

Signed

Date

### **Records**

I/We give my/our permission for my child's development record to be shared with other agencies and providers eg child minders and also to be forwarded onto another setting on my child leaving the nursery.

Signed

Date

### **Centre Activities**

I/We give my/our consent to my child taking part in normal centre activities, which are organised to take place outside the centre; on the understanding that I will be told in advance of the activity.

Signed

Date

### **Forest School**

I/We give my/our permission for my child to take part in the Forest School activities.

Signed

Date

### **Animals**

We sometime have animals come into the nursery ie visits for Exotic Zoo, Pets at Home, we ask for permission for your child to be able to stroke or hold the animals. I/We give my/our permission for our child to take part in the above activity.

Signed

Date

### **Cultural Information**

How would you describe your child's ethnicity or cultural background?

What is the main religion in your family (if any)?

Are there any festivals or special occasions celebrated in your culture that you would like to see acknowledged within the centre

What language(s) is/are spoken in your home?

If English is not the main language spoken at home, will this be your child's first experience of being in an English speaking environment?

Yes / No

<b>Agreement</b>	
<b>Signed:</b>	<b>Date:</b>
<b>Signed:</b>	<b>Date:</b>

### **Change of Circumstances**

Please could you keep us informed of any changes in your child's routine, which may affect their time at the Nursery. This includes their health and any family circumstances, no matter how minor. All information will be dealt with in a sensitive manner.

I will keep the nursery informed of any changes to my child's health, etc. at all times.

**Parent/Carer Signature Required:**

**Date:**