

# application form

# Cranley Nursery

www.cranleynursery.co.uk

enquiries@cranleynursery.co.uk

## Enrolment details

Full name of child: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Male  Female

Ethnic background/Language spoken at home: \_\_\_\_\_

Home address: \_\_\_\_\_

Postcode: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

## Emergency details

Primary carer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Work: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Secondary carer: \_\_\_\_\_ Occupation: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Work: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Emergency contact: (must be different from above contacts) \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Work: \_\_\_\_\_ Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Child to be collected by: \_\_\_\_\_

## Child/medical details

Doctor's name and address:          Telephone:	Immunisation details:          Up to date Yes <input type="checkbox"/> No <input type="checkbox"/>
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Health and dietary details: \_\_\_\_\_

Known allergies: \_\_\_\_\_

Additional support required: Yes  No  Details: \_\_\_\_\_

Individual learning programme in place: Yes  No

## Nursery and start date

I wish my child to attend the following nursery: Craiglockhart  Buckstone  Lanark Road

I wish my child to start on the following date: \_\_\_\_\_

## Sessions required (Please indicate)

Buckstone and Craiglockhart sessions are available 0800-1800 and Lanark Road is available 0730-1800

(Please indicate)	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Full Day					

please turn over...

## Terms and Conditions

I have read and agree to the Cranley Nursery Limited's terms and conditions.

Signed

Date

## Permissions

PLEASE TICK

I am aware that Cranley nursery has a Child Protection and Complaints Procedure Policy.

I give Cranley Nursery permission to take photographs of my child which can be used for display in the nursery and on the nursery website.

I give Cranley Nursery permission to include photographs of my child in group pictures for their 'Personal Learning Plan'. I understand these would be included in other children's profiles as well as my own child's profile.

I give Cranley Nursery permission to take my child on supervised walks around the local area, e.g. local Library.

I give Cranley Nursery permission to take my child on supervised trips on the Nursery Minibus, but understand that I will be given detail of these trips in advance.

I give Cranley Nursery permission for my child to brush his/her teeth in the nursery. I understand the nursery will supply a toothbrush for my child.

I give Cranley Nursery staff permission to apply sun cream during the summer months.

I give Cranley Nursery staff permission in the event of an accident, or my child requiring emergency medical treatment, to take the child to a GP or Hospital as required after being informed.

I give Cranley Nursery staff permission to administer medicine to my child after completing a medical form.

## All about your child

Is there any information you would like to share with the nursery to help your child feel settled e.g. comforters, favourite songs etc?

Signed

Date

### FOR NURSERY USE ONLY

Deposit received

Date