



Carr Manor Nursery

www.carrmanor.co.uk

Enrolment Form

Childs full name _____ Known as _____
 Childs full address _____
 _____ Postcode _____
 Childs date of birth _____ NHS Number _____
 Ethnic origin _____
 Please indicate sessions required:
 For funded session only (FEYE):
 Please indicate 5 hours or 7.5 hours
 in the relevant box, otherwise tick:
 For FEYE only, please tick if you require: Breakfast: ___ Lunch: ___ Tea: ___

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

Parents

Relationship to child _____ Legal contact Yes/No _____ Are you in receipt of tax credits Yes/No _____
 Full name including title _____
 Address _____ Postcode _____
 Mobile phone _____ Home phone _____
 Employer _____ Work phone _____
 Email address (for invoice/information purposes) _____

Relationship to child _____ Legal contact Yes/No _____ Are you in receipt of tax credits Yes/No _____
 Full name including title _____
 Address _____ Postcode _____
 Mobile phone _____ Home phone _____
 Employer _____ Work phone _____

Alternative Emergency Contact

Relationship to child _____
 Full name including title _____
 Address _____ Postcode _____
 Mobile phone _____ Home phone _____
 Employer _____ Work phone _____
 If you wish, more emergency contacts may be added on separate sheet of paper

Medical Information

Name of doctor _____ Clinic _____

Address _____
Postcode _____

Telephone no. _____

Allergies _____

Medication _____

Injections/immunisations up to date? Yes/No

Medical problems _____

Special dietary requirements _____

Health requirements _____

Special Educational Needs

Does your child have a recognised disability? Yes/No

If so, please specify _____

Other Childcare Arrangements

Does your child attend any other setting? Yes/No

Name of establishment/care provider _____

Address _____
Postcode _____

Telephone no. _____ How many days per week do they attend? _____

Where did you hear about us?

Terms and Conditions

1. £150 deposit is required for all places except for free funded places (FEYE). This is non refundable if your child does not start. However, if your child does start then the amount is refunded from your first months invoice.
2. Fees are paid in advance, on the 2nd day of the month that your child attends, by debit card, credit card or cash. A late payment fee, equivalent to 8% per annum, will be charged for payments not cleared by the end of the month.
3. When making a payment by credit card there will be an additional 2.05% added to your child's fees. There is no charge for using a debit card.
4. Fees are subject to an increase in each you and may happen more than once.
5. One month's written notice must be given should you wish to withdraw your child or reduce your sessions.
6. Changes to the FREE entitlement will only be made on the 1st of the month following one months written notice.
7. A late pickup fee of £10.00 is charged for each 15 minutes you go beyond your paid session.
8. We may suspend the provision of childcare and add on one months notice at any time if you have failed to pay your nursery fees.
9. The first named person will be the one whose name will appear on the invoices. This does not take away any responsibility for the second named person on the enrolment form to ensure that the invoices are paid on time.
10. Should you employ any of our staff within 6 months of them leaving the setting, you shall be liable to pay Carr Manor Nursery a figure representing 20% of the relevant member of staff's gross annual salary. This figure represents the cost to us of recruiting and training a suitable member of staff.
11. Should your invoice not be paid by the date your child leaves nursery the debt will be passed to a debt collection agency. All costs incurred in collecting the debt will be added to the outstanding balance including a £30.00 admin fee.
12. All enrolment information will be kept on Parenta software. Please speak to the management for further details.
13. This agreement is signed in conjunction with the "Parental Agreement for the Provision of the Free Entitlement".
14. We have an obligation to report to the relevant authorities any suspicions we have that your child has suffered neglect or abuse and we may do so without your consent and/or without informing you.
15. During your child's free settling in sessions you will be asked to read a number of policies. By signing the bottom of this agreement you have confirmed that you will do this.

I hereby apply for the admission of the above named child to Carr Manor Nursery. I have read and understood the Terms and Conditions and agree to comply to them and to any other conditions which may be required in the future. Any parent/carer who does not sign below but is mentioned on the previous page will be liable for any outstanding fees.

The date I wish my child to commence nursery is _____

Parents signature _____ Date _____

Parents signature _____ Date _____

Consent (Please delete where appropriate)

I do/do not give consent for my child
to be photographed for learning
journeys, displays and publications. Parents signature _____
Date _____

I do/do not give consent for my child
to be photographed for Facebook and
our website. Parents signature _____
Date _____

I do/do not give consent for my child
to be taken off the premises without
prior notice for walks. Parents signature _____
Date _____

I do/do not give consent for a
representative of Carr Manor Nursery
to administer liquid paracetamol.
Please supply with your child's
name clearly displayed. Parents signature _____
Date _____

I do/do not give consent for a
representative of Carr Manor Nursery
to apply nappy cream. Please supply
with your child's name clearly
displayed. Parents signature _____
Date _____

I do/do not give consent for a
representative of Carr Manor Nursery
to seek medical advice on behalf of
myself in case of an emergency. Parents signature _____
Date _____

I do/do not give consent for my child
to have sun cream applied. Please
supply with your child's name
clearly displayed. Parents signature _____
Date _____

I do/do not give consent for my child
to taste various food. Parents signature _____
Date _____

Please indicate if your child has any food allergies or if they are unable to eat certain food
for any reason. _____

Office Use Only

Date enrolled on Parenta _____

Signed _____