

# SUNRISE NURSERY APPLICATION FORM

To return to Sunrise Nursery, 1, Cazenove Road N16 6PA

## Child's Details

Child's First Name .....Surname.....

Gender .....

Date of Birth.....Ethnicity.....

Preferred Name.....

Language(s) Spoken at Home.....

Start date: Date you would like your child to start on.....

I/We would like the child to join on the following days/sessions:

Monday am/pm; Tuesday am/pm; Wednesday am/pm; Thursday am/pm; Friday am/pm.

## Name & Contact Information of Parents/Carers the child lives with:

1. Name.....

Relationship.....

Does this parent/carer have parental responsibility?      Yes/No

Home Address .....

Postcode.....

Telephone..... Mobile no.....

Email (Please write legibly).....

Occupation... ..

Work Phone Number.....

2. Name.....

Relationship.....

Does this parent/carer have parental responsibility?      Yes/No

Home Address .....

Telephone.....Mobile no.....

Email (Please write legibly).....

Occupation.....

Work Phone Number.....

Please state any skills you'd be willing to offer.

.....  
.....

Are there any other children in your family? If so, how old are they.....

**Emergency Contact Details**

Name: .....Relationship to child.....

Tel. No. .... Mobile.....

Name .....

Tel. No .....Mobile.....

Name: .....Relationship to child.....

Tel. No. .... Mobile.....

Persons authorised to collect the child (must be over 16 years of age)

Name .....Relationship to child .....

Tel. No ..... Mobile.....

Name .....Relationship to child .....

Tel. No ..... Mobile.....

Name: .....Relationship to child.....

Tel. No. .... Mobile.....

**Child details**

Has the child attended any previous nursery /playgroup/school? Please give details.

.....

Any special words that the child responds to?

.....

Any special way of asking for things?

.....

Things that help him/her to sleep/rest, particular toys/comforters etc? ...

.....

Toilet training?

.....  
Any other information about the child, e.g.: any fears, any dislikes etc  
.....  
.....

**Health**

Doctor's Name & Address  
.....  
..... Telephone number.....

Has the child had (please tick where applicable):

- Scarlet Fever        Mumps        Measles      
German Measles        Diphtheria        Chickenpox

Has the child been immunised against (tick where applicable)?

- Mumps    Measles    German Measles      
Diphtheria    Polio    Whooping Cough        Tetanus

Please give a brief description of any serious illnesses, accidents, physical or emotional shocks that the child has experienced in the past.  
.....  
.....

Does the child have any special needs or disabilities?  
Details.....  
.....  
.....

If 'Yes' what support will the child need in our setting?  
.....  
.....

Does the child have any special dietary needs or preferences?  
.....  
.....

Does the child have any allergies?  
.....  
.....

If 'Yes' state the 'Allergen' and the action to be taken.  
.....  
.....  
.....

Does the child have any other health problems?  
.....  
.....

Has the child had their 27-month health check? If so, please provide a copy from the red book. If no, please contact your health visitor. If you are unable to do this, the nursery can arrange it for you.  
.....

Are there any other professionals working with the child e.g. therapists, social workers?.....  
.....

**Cultural Background**

Ethnicity: .....  
The main language(s) spoken at home. ....  
Any special words in your language(s).....  
.....

If English is not the main language spoken at home, will this be the child’s first experience of being in an English-speaking environment?  
If so, discuss and agree with the key person how child’s settling in can be supported.  
Any main religion in the family? .....  
Any festivals or special occasions celebrated in your culture that the child will be taking part in that you would like to see acknowledged and celebrated while he/she is in our setting?  
.....

**Authorisation**

1. We organise outings to theatres, museums, parks, etc. termly.  
Also, as a part of our planning we like to take the children on daily outings to the local parks/shops/libraries or any other local areas which could help towards children learning and development.

Please sign below to give permission for your child to be included in these:  
  
(signed).....

2. We take photos of the children to make a record of their achievements and to share them with parents. Children’s photos may appear in other children’s folders as well if taken in groups. We may also include a photo of your child in promotional materials including our Website. **Parents must never share other children’s photos online.**

Please sign below to give permission for your child to be included in these:  
Tick which you agree to:

Website:.....Social Media.....Single Observation.....Group Observation....

3. In case of accident or medical emergency, we may seek emergency medical advice or treatment.

Please sign below to give permission for this:  
  
(signed) .....

4. In case of minor accidents we could use any of the following  
Homeopathic treatments: Remedies, Calendula, Arnica, Bach Flower Remedies,  
Plasters  
Please sign below to give permission for this or cross out any that you do not allow us  
to use.

(signed) .....

5. We may need to share information about any additional needs that the child may  
have or to pass on child development summaries to the next provider/school/ any  
other professional.

Please sign below to give permission for this:

(signed).....

6. In Sunrise we may let children climb the trees when the weather is dry so the  
branches are not slippery.

Please sign below if you give permission for this:

(Signed).....

7. In Sunrise if a child is in distress, we will give them hugs and cuddles with your  
permission.

Please sign below if you give permission for this:

(Signed).....

## **Fees**

The School/Nursery fees are .....per month.  
I understand that this amount is to be paid for each of the 12 months that the nursery  
is open. I agree to pay this on ..... of every month.  
(this also includes if my child is absent from school due to illness or taking a holiday  
during term time).

### **Outstanding Fees**

As per the contract payments must be made in full and in advance before the  
5<sup>th</sup> working day of the month. Parents will be issued with a reminder invoice,  
statement of fees and a letter asking payment to be made. Failure to do so will result  
in a second letter issued, informing parents not to bring their child into nursery until  
the outstanding balance is paid in full.  
In the instance that payment is in arrears after receiving 2 reminder letters, the child's  
placement at Sunrise Nursery will be terminated and the outstanding balance will be  
referred to a debt collection agency.

**Enrolment**

1-month deposit is due upon enrolment. I understand that this covers the last month of my child’s attendance at the school/nursery, and is therefore only refundable when 1-month notice is given before withdrawing my child from the nursery.

- I enclose 1-month deposit, totalling £.....(will be made by bank transfer)
- Please bring your child’s original birth certificate on their admission.

**Our Bank details:**

Sunrise Education Trust

**Cooperative Bank. Account Number: 65979493. Sort Code: 08 92 99**

As reference, please use the **child’s name**.

I /we fully understand that the fees we are committed to paying due monthly, and I will therefore set up a monthly standing order

I/we understand that if I do not make a payment for a child for a period of 1 month, without explanation, my case will be presented to Sunrise Education Trust for review and I may be asked to remove my child.

I/we understand that if the nursery has to take legal proceedings to recover arrears

I/we are liable for these costs to be added to the outstanding amount.

**FEES**

Opening hours: 8 am – 6 pm

We kindly ask everyone who joins us to accept our 46-week academic year which is longer than the standard 38 week nursery year.

<b>Days at Nursery</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
<b>Cost per week, for either 38 or 49 weeks</b>	£85	£170	£255	£323	£383

Holidays and inset days have been calculated in.

**Children on 15 or 30 hours will be charged for the extra hours at £9 per hour. Funded children will also be charged £1.50 per day for lunch.**

## Funding Eligibility

**Your child is eligible for a Nursery Education Funding the term after their third birthday and until the term after their 5<sup>th</sup> birthday.**

**We will apply for this on your behalf from Hackney Education**

**Some children can be entitled to free childcare from age two or eligible for 30 hours.**

Please check if you are eligible at <https://www.childcarechoices.gov.uk/>, we **cannot** apply for this on your behalf

If so, please provide the reference number (It starts with EY Code for 2 years free entitlement) Number: .....

Is the child eligible for 30 hours government funding? If so, please provide the 11-digit code and date applied.  
.....

### **For all funding please provide:**

Parent full name: .....

Date of Birth: .....

National Insurance Number: .....

Parent's Signature .....Date.....

Your details will remain confidential.

### Agreements

I/We agree to respect the setting's -

- Approach (regarding non-tolerance of aggression in language or behaviour.)
- I have read/agreed and signed the current 'Safeguarding Children Policy' and 'Behaviour Policy'

(All the other Policies/Procedures, including the Complaints procedure are available upon request).

Signature.....

Office Use