



## Registration form

Child's Name.....  
 Knows As.....  
 Address.....  
 .....  
 Post Code..... Tel nos:.....  
 .....  
 Date of Birth (Child).....  
 Parents names (mother)..... (father).....  
 Religion:.....  
 Language used/spoken at home.....  
 Nursery attended.....

### MEDICAL DETAILS

Doctors Name.....  
 Address.....  
 Tel:.....

### DETAILS OF IMMUNISATION.....

Allergies:.....  
 Dietary Needs:.....  
 Additional information:.....  
 .....

### ABOUT AUTHORISED PEOPLE WHO MAY COLLECT YOUR CHILD.

PLEASE NOTE: Your child will not be released into the care of an under aged person. We will only release your child to a person you have authorised If their details are listed below. And you have contacted the settings to inform that they will be collecting your child.

- |         |           |              |
|---------|-----------|--------------|
| 1. .... | Tel:..... | Relationship |
| 2. .... | Tel:..... | Relationship |

### REQUESTED DATE OF ENTRY

On which Saturdays will your child attend the Creche ?

When would you like your child to start at the Creche?

.....

Any other information.....  
 .....

Fees are payable on Saturday by *Cheque or cash.*



**DECLARATIONS**

Some of the routine activities of the Creche may involve visiting parks or the library. For your child to take part in these activities, you must give your permission.

*I agree to my child taking part in the activity described above.*

YES...../ NO.....

I consent to any emergency medical treatment necessary during the running of the Creche.

YES...../ NO .....

Signed.....

Date.....

ALTHOUGH, EVERY CARE WILL BE TAKEN TO ENSURE THE SAFETY OF YOUR CHILD.

I AGREE TO ABIDE BY EN-GEDZEE CRECHE TERMS AND CONDITION, WHICH I HAVE READ AND FULLY UNDERSTAND, I DECLARE THAT ALL THE INFORMATION GIVEN IS TRUE AND ANY CHANGES WILL BE NOTIFIED TO EN-GEDZEE CRECHE.

Signed.....

Date.....



**EN-GEDZEE**

**CRêCHE**