



**For Office use only.**

Xero	
Eylog	
File	
Contact Card	

# Registration Pack

We need some details about your child and family. We have a legal obligation to collect and process this information in accordance with The Early Years Foundation Stage (Welfare Requirements) Regulations 2012. Where information to be supplied is voluntary or where we do need consent this is identified. The information provided will be kept in paper form and used for the purpose of maintaining appropriate contact details and for the safety and well-being of your child.



Anglia Sunshine Nurseries, 8 Warner Way,  
Chilton Industrial Estate, Sudbury, Suffolk. CO10 2GG.  
[www.angliasunshinenurseries.co.uk](http://www.angliasunshinenurseries.co.uk)  
Companies House Number: 7060969





## Parent/Carer Contract

We have made a commitment to provide high standard quality nursery care and keep you involved and informed of our plans. To provide this service for you we need you to read and agree to the following:

### **I understand that:**

- Nursery fees should be paid 1 month in advance within the first week of the month.
- I am aware that a late payment fee will be charged on the second week of the month at a rate of £20.00
- If the fees are not paid by the end of the month my child will no longer be able to attend nursery until the fees are paid in full.
- If my child is unable to attend I will let you know as soon as possible, fees are still payable for non-attendance.
- I understand that I am unable to swap or change any funded sessions.
- I will keep you informed of any changes to my address or emergency contact details.
- I will collect my child by the end of their session. If I am likely to be late I will inform you as soon as possible. I understand a standard rate is charged for any late pick-ups.
- If I wish to take my child out of nursery I will give a months' notice in writing.
- I agree to these terms and conditions.

**Name of Child:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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Dear Parents/Carers,

### Introducing the **360 degrees View of Eylog – Helping us to Involve, Share and Engage with Parents**

We have recently invested in a new digitally formatted way of recording our observations, photos and short video clips of all the outstanding developments that your child achieves during the course of their nursery sessions. We wanted a way of being able to capture them on the spot to be able to share them with you, so you never have to miss out on their magical moments.

You may have seen the staff using the tablets to write up their key children's wow moments and achievements, each room has their own tablet to ensure they don't miss anything. The staff have now got to grips with them and are ready to start sharing the learning journeys with you.

You will be able to access the learning journey at the click of a button and be able to view the observations recorded at the nursery. When the staff submit a completed observation of your child the email addresses that you provide us with will be alerted with a message, allowing you to view it. The new EyLog system also makes it possible for you to contribute to the learning journey with observations from home, making the learning journey even more comprehensive and enabling a 360 degree view of your child's development in their early years.

To share the learning journey with you there is a secure system in place that is password protected, for us to activate this we need your personal email address. Please complete the slip below if you wish to sign up for this service. You can add up to two email addresses to allow for each parent to be notified individually.

If you do not wish to use the email service we will continue to do the learning journey on the tablets but will share them with you at parent's evenings.

If you would like some more information or a demonstration please do not hesitate to come and speak to the staff in the room or Samantha in the office.

Yours sincerely

Samantha Richardson

Nursery Manager

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Name of Child -

I / We wish to sign up for accessing my child's Learning Journey on line with EY Log.

Email address/es:

Signed:



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Basic Details	
Child's name:	Known as:
Date of birth:	Gender:
Name of parent(s) with whom the child lives:	
Parent/Carer  Do you have parental responsibility for this child? <b>Yes/No</b> (please delete as appropriate)  If no, do you have legal contact? <b>Yes/No</b> (please delete as appropriate)	Parent/Carer  Do you have parental responsibility for this child? <b>Yes/No</b> (please delete as appropriate)  If no, do you have legal contact? <b>Yes/No</b> (please delete as appropriate)
Address of parent(s)/carer with whom the child lives:	
Home/mobile telephone numbers:  Parent/Carer:   Parent/Carer:	Work place/ telephone numbers:  Parent/Carer:   Parent/Carer:
Email address	
Name of parent(s) with whom the child <b>does not</b> live:	
Does this parent have parental responsibility?	<b>Yes/No</b> (please delete as appropriate)
Does this parent have legal contact?	<b>Yes/No</b> (please delete as appropriate)

Does this parent have legal access to the child?		<b>Yes/No</b>	<i>(please delete as appropriate)</i>
Address:			
Home telephone number:		Mobile telephone number:	
<b>Emergency Contact Details</b>  <i>Please provide the names and contact details of 2 people (other than parents/guardians) who we can contact in case of an emergency.</i> <b>NOTE: It is your responsibility to ensure these people are happy for us to contact them and to hold their details.</b>			
Emergency Contact 1		Emergency Contact 2	
Name		Name	
Home telephone no		Home telephone no	
Mobile telephone no		Mobile telephone no	
Relationship to child		Relationship to child	
Persons authorised to collect the child. This is any other adult who may collect your child in your absence. Authorised persons must be over 18 years of age.			
Authorised Person 1		Authorised Person 2	
Name		Name	
Home telephone no		Home telephone no	
Mobile telephone no		Mobile telephone no	
Relationship to child		Relationship to child	
Additional Security Information			
<p>We have the safety and well-being of the children in mind at all times and we are sure that you will appreciate that persons known to you are strangers to us and we do need means of identifying those you have authorised to collect your child (either authorised or emergency contacts) when you are unable to.</p> <p>We as a setting and especially your child/children key person will be familiar with you but we do not always have the opportunity to meet both parents. This is also true of your nominated emergency contacts and authorised persons. We therefore request that should anyone unknown to us be collecting your child that you inform us in advance and show us a photograph to enable us to identify them when they collect your child.</p>			

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Health Information			
Does your child suffer from any of the following <i>(please tick those which apply)</i>			
Asthma	<input type="checkbox"/>	Epilepsy	<input type="checkbox"/>
Heart Condition	<input type="checkbox"/>	Kidney/Bladder problems	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	Bee Sting Allergy	<input type="checkbox"/>
Sight Impairment	<input type="checkbox"/>	Deafness	<input type="checkbox"/>
Wears Glasses	<input type="checkbox"/>	Other	<input type="checkbox"/>
If you have ticked any of the boxes above please give details here:			
Does your child require medication, either long term for existing conditions or lifesaving drugs such as Ventolin? <i>(Please give details of the medication and dosage)</i>			
Does your child have any special dietary needs or preferences? <b>Yes/No</b> <i>(Please delete as applicable)</i>			
If yes please give details below			
Does your child have known allergies? <b>Yes/No</b> <i>(Please delete as applicable)</i>			
If yes please give details below			
Name of GP:			
Surgery:			
Address:			
Telephone number:			

The following information is voluntary and you do not have to complete it. However, we have a legitimate interest in requesting this data as it will assist in providing the necessary care for your child and to allow us to monitor and assess their development.

Health Visitor/Social Worker	
Name	Telephone number
Based at	
Has your child had their two year old progress check?	<b>Yes/No</b> <i>(Please delete as applicable)</i>
If so, on what date was this completed?	
Are you able to share this information with the setting?	<b>Yes/No</b> <i>(Please delete as applicable)</i>

The following section requires information classed as 'sensitive personal data' for which we need your consent to collect and process. We request this data as, in some cases we have a contractual obligation to do so with our Local Authority, but also as we have a legitimate interest to allow us to plan and meet your child's needs.

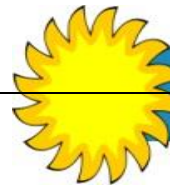
Ethnicity and Cultural background	
How would you describe your child's ethnicity/cultural background?	
What is the main religion of your family?	
Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while s/he is in our setting?	
What is/are the main language(s) spoken at home?	
If English is an additional language, will this be your child's first experience of being in an English-speaking environment?	<b>Yes/No</b> <i>(Please delete as applicable)</i>

Special Educational Needs and Disabilities	
Does your child have any special needs or disabilities? <b>Yes/No</b> (Please delete as applicable)	
If yes please give details below	
Does your child/family have an EHA (Early Help Assessment) in place	
Will your child require any additional support in our setting?	
Professionals involved with the child	
Name	Name
Agency	Agency
Role	Role
Telephone no	Telephone no

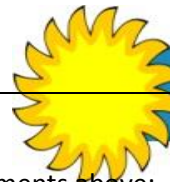
The following section contains information for which we need your consent. As required by data protection we have a duty to inform you that you can withdraw your consent for any of the permissions detailed below at any time. Should you wish to withdraw consent please discuss this with a member of staff in the first instance.

Permissions and Consent
Permission for the setting to act in loco parentis
If emergency treatment is required, either whilst your child is on the premises or on an outing, (for the duration of your child's time with us) and the parents or legal guardians cannot be reached immediately, your signature in the space provided below empowers the settings management to exercise their own judgement in calling the doctor/dentist indicated above or to transport your child to a hospital casualty department by ambulance. Please read and fill in the declaration below, cross out the statement/wording that does not apply, and sign and date this section.
I / We parent(s)/guardian(s) of _____ do / do not give consent on my / our behalf for an anaesthetic to be administered or for any other urgent medical treatment to be given.
I / We do not agree to this statement and indicate our wishes as follows
Signatures of parent(s)





Date	
Permission for the application of sun cream	
Please read the statements below and strike through the statement that <b>does not</b> apply	
I / We parent(s)/guardian(s) of	
I / We will supply our own sun cream, clearly labelled with my child (rens) name.	
Signatures of parent (s)	
Date	
Please tick the statements below if you consent to the following:	
<input type="checkbox"/>	I consent to my child participating in off-site outings as part of daily practice e.g. trips to the park, etc
<input type="checkbox"/>	I consent to my child having their photograph taken for use in displays, for name peg, EYlog etc. within the setting
<input type="checkbox"/>	I give my permission for Calpol to be administered to my child in accordance with Anglia Sunshine Nurseries Administration of Medicine Policy.
<input type="checkbox"/>	I consent to my child having their photograph taken to be used for publicity purposes – website, flyers.
<input type="checkbox"/>	I consent to my child’s artwork (with their name) being displayed in the Setting
<input type="checkbox"/>	I consent to my child’s learning journey being shared with Ofsted inspectors and/or as part of audits by the local authority
<input type="checkbox"/>	I consent to my child having their photograph taken by a professional, individual and group photos, and photos/videos taken of the Christmas production.
<input type="checkbox"/>	I consent to the use of plasters/adhesive bandages on my child.
<input type="checkbox"/>	I consent to the use of facepaint on occasions
<input type="checkbox"/>	I consent to my child having birthday/celebration food on special occasions
<input type="checkbox"/>	I consent to my child’s photo to appear in other children’s learning journeys for observation purposes
<input type="checkbox"/>	I consent to photos of my child to be shared on the Anglia Sunshine Nurseries social media sites



Please sign below to confirm your consent for the indicated statements above:

Signature of Parent(s)/Guardian:

\*Please ask a member of staff for policies and procedures relating the above statements which contain specific details.

**Additional Information**

Proposed Start Date:

Please tick sessions required:

SESSIONS	MON	TUE	WED	THUR	FRI
Early 7am – 8am – by prior arrangement					
AM 8am to 1pm including lunch					
PM 1.00pm to 6pm including tea					
Full Day 8am to 6 pm including lunch & tea					
Short Day 8am to 3:30pm including lunch					

When is your child due to start school? \_\_\_\_\_

Name of School \_\_\_\_\_

To help settle your child into the Nursery please enter any personal details that you feel may be relevant:

Please use this space if you wish to add any further information.

Further information regarding how we use children’s images within the setting can be found in our Image Use Policy

SPECIAL NOTE: Please notify us immediately of any changes to the information provided. Please feel free to come and discuss any problems or concerns with us. If there are any other notes you would like to add, please use the space below.

I / We confirm that the information provided on this form is correct to the best of our knowledge.  
Signature of Parent (s)/Carer (s)

Date

Thank you for completing this form. You are welcome to request to see the information we hold on you and your child at any time.

## **Privacy Statement and Data Policy**

### **(How we use children's information)**

#### **The categories of child information that we collect, hold and share include:**

The information we request from you (by way of your child's registration form and pack) we have a legal obligation to collect as required by The Early Years Foundation Stage (Welfare Requirements) Regulations 2012.

- Personal information (such as name, date of birth and address)
- Attendance information (such as session attended, number of absences and absence reasons)
- Characteristics (such as ethnicity, language, nationality, country of birth)
- Relevant medical information (such as conditions that may require treatment during sessions times)
- Assessment information
- Information about any special education need

#### **Why we collect and use this information**

We use the data:

- To support the child's learning and development
- To monitor and report on the child's progress, both internally and to the County Council
- To provide appropriate care to meet the needs of the child
- To assess the quality of our services
- To comply with the law regarding data sharing
- To comply with the requirements of the Early Years Foundation Statutory Framework (2017)

#### **The Lawful basis on which we use this information**

We collect and use children's information under the Early Years Foundation Stage Statutory Framework (2017), the Data Protection Act (1996) and the GDPR (2018)

#### **Collecting Child Information**

Whilst the majority of child information you provide us with is mandatory, some of it is provided on a voluntary basis. To comply with the General Data Protection Regulation, we will inform you whether you are required to provide certain information to us or if you have a choice in this.

#### **Storing Children's data**

We hold all children's records as follows:

- attendance, registrations medication and accident records for 3 years after the child has left the setting.
- children's welfare data for 21 years after the child has left the nursery, to allow for claims against our Public Liability Insurance. After that records are shredded.

Who we Share Children's Information with

- Schools and settings that the children attend after leaving us
- Our local authority
- The Multi-Agency Safeguarding Hub/Team

#### **Why we share children's information**

We do not share information about our children with anyone without consent unless the law and our policies allow us to do so.

## Requesting access to your personal data

Under data protection legislation, parents have the right to request access to their child's information that we hold.

You also have the right to:

- Object to processing of personal data that is likely to cause, or is causing damage or distress
- Prevent processing for direct marketing
- Object to decisions being taken by automated means
- In certain circumstances, have inaccurate personal data rectified, blocked, erased, or destroyed
- Claim compensation for damages caused by a breach of the Data Protection regulations

If you have a concern about the way we are collecting or using your personal data, we request that you raise your concern with us in the first instance. Alternatively, you can contact the Information Commissioner's Office at <https://ico.org.uk/concerns/>

***This is a big change to data protection legislation we will update our systems and processes in order to ensure we are fully compliant as the legislation evolves.***