

Broomhill Nursery

@ Broomhill
264 Broomhill Rd
Aberdeen
AB10 7LP
01224 208063

@ Fonthill
36 Fonthill Rd
Aberdeen
AB11 6UJ
01224 588898

@Cults
397 North Deeside Rd
Cults
AB15 9SX
01224 868606

ENROLMENT FORM

By signing this form I agree to abide by the regulations of the Broomhill Nursery.
If there are any changes to the information you provide, please inform the nursery immediately.

Please use BLOCK CAPITALS

1. Full name of child _____

Male */ Female* (*Delete as appropriate)

Ethnic Origin _____ Date of birth _____

Address _____

Postcode _____

Telephone _____ Mobile(s) _____

E-mail addresses _____

2. Please indicate specific days required, including times of arrival and departure

3. Parents' return to work date _____

4. Previous childcare setting attended _____

5. Preferred length of settling in period _____

Parents' names, daytime contact addresses and phone numbers

1: _____ 2: _____

6. Childs' Doctor _____ Health Visitor _____

Phone _____ Phone _____

Details of any allergies or intolerances _____

7. Please indicate any special dietary requirements your child has on medical or religious grounds. A menu is displayed each week on the nursery noticeboard. The food is varied and wholesome.

8. Medication

Do you have any preferred medicine if your child displays symptoms of fever, pain (e.g. teething)?

Calpol _____ Disprol _____ Junior Paracetamol _____ Nurofen _____

Other _____

Is there anything else you think we should know about your child? _____

8. Please indicate any additional information that would assist us in supporting your child and family.

Who can collect me?

To ensure safe collection of your child please list below the names of persons permitted to collect your child at any time.

<u>Name of Person</u>	<u>Relationship to Child</u>
_____	_____
_____	_____
_____	_____
_____	_____

During your child's time at nursery we require your authorisation for a variety of reasons. These mainly being:

- Impromptu Outings
- Use of photography for assessment
- Inclusion of children in photos and video recordings taken by other parents (i.e. at Christmas Show, Sports Day etc.)
- Application of sun creams, nappy rash creams, stinging relief cream and prescribed creams (which must be in original container and be accompanied by a letter requesting that we apply it)
- Inclusion of children in photos displayed on password protected website
- Inclusion of children in photos displayed on open access website

Please tick above, those with which you agree, then sign below.

I wish to apply for admission of the above named child to your nursery at;
Broomhill Road*/ Fonthill Road* / North Deeside Road* (*Delete as Appropriate)

I have read the regulations and I agree to comply by them.

Signed _____ Date _____
(Legal Guardian)

I acknowledge being made aware that my child may only have a place until the July prior to starting school, depending on child placements.

Signed _____ Date _____
(Legal Guardian)

Date on which I wish my child to start nursery _____