## Child registration form – Club

## **Personal Details**

Name of child*	
Date of birth*	
Gender *	
Home address*	
Postcode	
Hair colour *	Eye colour
Religion	
Ethnic origin	Nationality*
Language(s) spoken at home*	
Details of any disabilities/special needs *	
How did you hear about Choo Choo's Day Nursery?	

**About your family** 

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Mother/carer*		
Title		
First name *		
Surname*		
Password*		
Home address*		
Postcode		
Home tel numbers*		
Mobile*		
Home email*		
Work address* (if applicable) Postcode		
Work tel numbers*		
Work email		
Responsibilities* (Tick all that apply)	Parental responsibility	Payment of fees
	Collect child from nursery	Contact in emergency

<sup>\*</sup> Mandatory fields

Father/carer			
Title			
First name *			
Surname*			
Password*			
Home address*			
Daataada			
Postcode  Home tel numbers*			
Mobile*			
Home email* Work address			
vvork address			
Postcode			
Work tel numbers*			
Work email *			
Posponsibilitios*	Paren	tal responsibility	Payment of fees
Responsibilities* (Tick all that apply)			
(Troit all triat apply)	Collec	ct child from nursery	Contact in emergency
Other contacts			
Contact one			
Title			
First name			
Surname			
Relationship to the chile			
Password	u		
Address			
Addiess			
Postcode			
Tel number		Mobile	
Responsibilities		Collect child from nursery	Contact in emergency
(Tick all that apply)		Collect crilia from marsery	Contact in emergency
Contact two			
Title			
First name			
Surname			
Relationship to the child	d		
Password			
Address			
D ( )			
Postcode		K / = 1.11 =	
Tel number		Mobile	
Responsibilities (Tick all that apply)		Collect child from nursery	Contact in emergency

## Medical details

Does your child have any allergies? *	Yes / No (please circle)			
If yes, please give details of the cause and reaction				
Does your child have any special dietary requirements? *	Yes / No (please circle)			
If yes, please give details				
Name of GP and Surgery				
Address and Postcode				
Telephone number				
Other agency details				
Name				
Address and Postcode				
Telephone Number				
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Is there any other medical information that we need to know?				

## Permission

Permission for-	Please circle	Sign	Date
Take photos of your child, to use in the Club?	YES NO		
Use photos of your child for advertising (on the website, newspapers and other forms of advertising)	YES NO		
Take your child on outings, when an appropriate risk assessment has been performed	YES NO		
The use of sun cream in the summer	YES NO		
Permission to administer prescription medication	YES NO		
Permission to watch Parental guidance films (PG)	YES NO		
Permission to use photos of your child on social media (such as, Facebook)	YES NO		

Registration checklist – Please ensure you complete all of the below to avoid a delay in your child starting club. Once the registration forms have been received by Choo Choos, an activation link will be sent to both carer 1 and 2 for magicbooking, which is the online booking system we use for all clubs.

All sections of registration completed	
Contract	