**Little Peeple Nursery**

**Registration/Contact Details Form**

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| --- | --- | --- | --- |
| **Child’s full name:** |  | | |
| **Date of birth:** |  | | |
| **Mum/carer’s name:**  **(Delete as applicable:** |  | **Parental responsibility?** | Y/N |
| **Dad/carer’s name:**  **(Delete as applicable)** |  | **Parental responsibility?** | Y/N |
| **Home address:** |  | **Post code:** |  |
| **Mum/carer’s telephone number:** |  | **Mobile:** | |
| **Dad/carer’s telephone number:** |  | **Mobile:** | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Emergency contact (1) Name:** |  | **Relationship to child:** |  |
| **Contact telephone number:** |  | **Mobile:** |  |
| **Emergency contact (2) Name:** |  | **Relationship to child:** |  |
| **Contact telephone number:** |  | **Mobile:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Doctor’s name:** |  | | |
| **Telephone number:** |  | | |
| **Address:** |  | **Postcode:** |  |
| **Are your child’s immunisations up to date?** |  | | |

|  |  |
| --- | --- |
| **Does your child have any special dietary or medical needs we should be aware of, or any regular medications? If so, please provide details:** |  |
| **Any other additional information:** |  |

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| --- | --- | --- | --- |
| **I understand that I must give one month’s written notice to cancel the nursery place.** | | | |
| **Signed:** |  | **Date:** |  |

The information on this form is collected in order for us to be able to register your child’s place at the nursery and ensure their safety whilst at the nursery. We will never pass your data on to a third party without your permission, except in the case of safeguarding. Your data is kept secure. You have the right to see the data we hold on you at any time and the right to ask for us to delete your data, except in the case of safeguarding. We will provide you with a full copy of our Childcare Privacy Notice, and you can also read our full Privacy Policy on our website, <https://www.peeple.org.uk/privacy-policy>.