

Sophie's Den



Registration Form

Family Details

Child's Full Name:

Preferred or family name:

Date of Birth:.....

Parent's/carer's Names:

.....

Child's Home Address:

.....

.....

Parents/Carer's Address if either are different to the child's:

.....

Parent's/Carer's Email Addresses:.....

.....

Parent's/Carer's telephone numbers:

.....

Collection Password:

Please provide details of anyone else, other than parents, who are permitted to collect your child:

Name	Address	Contact Number

Emergency Contact Details

Emergency Contact 1

Name:

Relationship to child:

Telephone Numbers:

Emergency Contact 2

Name:

Relationship to child:

Telephone Numbers:

Emergency Contact 3

Name:

Relationship to child:

Telephone Numbers:

Health Information

Doctor's Name and Address:

.....

.....

Doctor's Telephone Number:

Health Visitor Contact Number:

Does your child have any health requirements? (please provide details if so)

.....

Are your child's vaccinations up to date? YES NO DON'T KNOW

Permissions

Outings, Transportation, Trips, walks to local parks etc...	<input type="checkbox"/> YES <input type="checkbox"/> NO
Holding Personal Information (computer based)	<input type="checkbox"/> YES <input type="checkbox"/> NO
Photographs to be taken of your child for wall displays	<input type="checkbox"/> YES <input type="checkbox"/> NO
Uploading photos onto my Facebook page and website	<input type="checkbox"/> YES <input type="checkbox"/> NO
First aid and emergency medical treatment.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Use of a child's own provided sun cream or a named brand provided by myself.	<input type="checkbox"/> YES <input type="checkbox"/> NO
Use of plasters when needed	<input type="checkbox"/> YES <input type="checkbox"/> NO

About your Child

Please write a small description of your child's personality.

.....
.....

Likes/dislikes:

.....

Favourite Song:

Favourite Food:

.....

Does your child use a comforter?

Does your child have a nap?

.....

Does your child have any allergies?

.....

People who are special to me:

.....

Details of any other setting or childcare attended:

.....

Start Date:

Which Days/hours do you require?

Signed..... Date