



Bright Bees Nursery
394 Gipsy Lane
Leicester
LE4 7DA
0116 2767492

For Office use only:
2 year NEG reference:
EYPP eligibility:
Start date:

Bright Bees Child Enrolment Form

Personal Details

Name of child: _____
Date of Birth: _____ Gender: Male Female
Home Address: _____ Post code: _____
Telephone No(s) _____
Ethnic origin: _____
Language spoken at home: _____
Religion: _____ Up to date immunisations? Yes No

Details of parents/guardians/Carers with legal parental responsibility

Name of Parent/Guardian: _____
Date of Birth: _____ National Insurance no.: _____
Telephone No(s) _____
Place of work: _____ Email: _____
Name of Parent/Guardian: _____
Date of Birth: _____ National Insurance no.: _____
Telephone No(s) _____
Place of work: _____ Email: _____

Emergency Contact

Name of emergency contact: _____
Contact number: _____
Name of person who will usually collect child: _____
Other persons who may collect the child: _____

Medical details

Allergies/dietary requirements/health problems/medication/ childhood illnesses:

Details of any special educational needs/disabilities: _____

Health care professionals involved

Name and address of GP: _____

Name and address of health visitor: _____

Any other professionals involved in your child's care: _____

EyLog- Online learning journey

- I hereby give consent for my child to be photographed/videoed for record-keeping purposes and for the use of Early Years Professionals at nursery.
- I agree that my child's observations, learning journey, reports and other documents created through eyLog can be stored on eyLog's systems. I agree to log in using only the personal log-in provided to me. The following email address(es) can be used to send me notifications through the eyLog system.
- I understand that there may be group photographs/videos that incorporate images of my child and other children and teachers. I agree that these photographs/videos may be used in other children's learning journeys. To protect and respect privacy, I agree not to use/upload/share the photographs, videos and audio recordings involving other children on public web-sites such as social media websites and may not utilise information from my child's learning journey for purposes other than understanding the development of my child.
- The Bright Bees policy on photographs/videos covers this in more detail, which I can access in the Policies Folder located at office.

Parent/Carer: _____ Your email ID _____

Parent/Carer 2: _____ Your email ID _____

Permissions

Please circle Yes/No to the following permissions. I give consent for:

- | | |
|---|--------|
| • Staff to administer medication as per medication policy | Yes/No |
| • Staff to give emergency treatment through First Aid | Yes/No |
| • Staff to take child to hospital in emergency with a written consent if there is a delay in getting parents signature | Yes/No |
| • Taking of photographs, including for use in promotional material | Yes/No |
| • Child to go on outings off the premises/ travel in a company vehicle | Yes/No |
| • Staff to apply sunscreen/ nappy cream (from home) if appropriate | Yes/No |
| • Nursery to pass on parents and children's details to the Leicester City Council and any other relevant third parties to apply for additional funding such as the Early Years Pupil Premium. | Yes/No |
| • My child to brush their teeth in the setting | Yes/No |

Signature of parent/Guardian/Carer with parental responsibility: _____

Name printed: _____ Date: _____