

# THE WENDY HOUSE DAY NURSERY



## Application Form

Name of Child: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Start Date: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

Mother/Guardian's Name: \_\_\_\_\_

Home Telephone\*: \_\_\_\_\_ Mobile/Work: \_\_\_\_\_

Father/Guardian's Name: \_\_\_\_\_

Home Telephone\*: \_\_\_\_\_ Mobile/Work: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Post Code: \_\_\_\_\_

### Emergency Contacts

Emergency Contact Name: \_\_\_\_\_

Emergency Number: \_\_\_\_\_

Relationship to Child: \_\_\_\_\_

Password\*\*: \_\_\_\_\_

\*\*Note – Whoever picks up your child from Nursery will need this password.

49 Salacre Lane  
Upton  
Wirral CH49 0TN

Phone: 0151 678 5544  
E-mail:  
upton@wendyhousewirral.com

125—127 King Street  
Egremont  
Wallasey CH44 0BZ

Phone: 0151 639 6669  
E-mail:  
wallasey@wendyhousewirral.com

201 Moss lane  
Litherland  
Liverpool L21 7NW

Phone: 0151 378 1314  
E-mail:  
litherland@wendyhousewirral.com

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## Contract Part 1

**Monday** \_\_\_\_\_ am to \_\_\_\_\_ pm  
**Tuesday** \_\_\_\_\_ am to \_\_\_\_\_ pm  
**Wednesday** \_\_\_\_\_ am to \_\_\_\_\_ pm  
**Thursday** \_\_\_\_\_ am to \_\_\_\_\_ pm  
**Friday** \_\_\_\_\_ am to \_\_\_\_\_ pm

To reserve a position for your child at the nursery, a holding deposit of one week's fees. Failure to commence on the date will result in a loss of the deposit.

The deposit will be deducted without interest from the final fees when leaving having given a four week termination notice.

### *Fee Conditions*

Fees will be payable for sickness and Bank Holidays.

### *Late Collections/Payments*

- There will be a £5.00 charge for the first hour or part hour.
  - Fees will be paid in advance at the start of each week, if paying weekly.
  - Fees will be paid in advance at the beginning of the month if paying monthly
- There will be a late payment charge if fees are paid late.

### *Illness*

Your child will be refused entry within the nursery if they have any infectious illnesses. If your child becomes unwell during a nursery session, you will be informed and asked to come and collect your child. Could parents please telephone the Nursery by 09.00am if your child is not attending on a contracted day.

Prescribed medications will only be administered with prior written authority from the parent/carers.

### *Notice of Termination*

Four weeks prior written notice is required to terminate this contract by either party. The Nursery reserves the right to terminate this contract without notice in the event that:

- Child/adult behaviour impinges on the well-being of others within the Nursery;  
Non or continued late payment of fees

Parental consultation shall take place but the decision of the Nursery is final.

### *Property*

We ask parents to label all personal property with his/her name. Children who are not yet toilet trained must bring nappies.

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## Consent Form Part 1

Name of Child \_\_\_\_\_

Name of parent \_\_\_\_\_

### **Photograph**

\*I/We agree/disagree for you to take photographs of my son/daughter for publicity, website or educational activities.

Signature \_\_\_\_\_

Date \_\_\_\_\_

- Please delete whichever is not applicable

### **Facebook/Twitter**

\*I/We agree/disagree for you to take photographs of my son/daughter for publicity, Facebook or educational activities.

Signature \_\_\_\_\_

Date \_\_\_\_\_

- \* Please delete whichever is not applicable

### **Going Out**

\*I/We agree/disagree for you to take our son/daughter out of the nursery premises for walks or educational visits with a responsible member of staff.

Signature \_\_\_\_\_

Date \_\_\_\_\_

- \* Please delete whichever is not applicable

### **Secure Internet Access**

\*I/We agree/disagree for our son/daughter to be viewed on your secure internet site.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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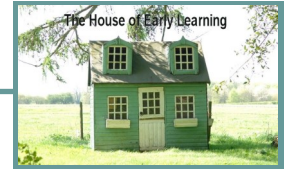
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## Consent Form Part 2

### **Sun Cream Application**

\*I/We agree/disagree for you the staff of the Wendy House to apply sun cream when ‘’#

Signature \_\_\_\_\_

Date \_\_\_\_\_

\* Please delete whichever is not applicable

### **Nappy Cream Application**

\*I/We agree/disagree for you the staff of the Wendy House to apply nappy cream when necessary.

Signature \_\_\_\_\_

Date \_\_\_\_\_

\* Please delete whichever is not applicable

I give my permission for you to seek emergency advice/ treatment if you are unable to contact me or any other person named as an emergency contact number on the registration form.

Parents signature.....

Date.....

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## Health Record Form

**Child's name** \_\_\_\_\_

**Any Allergies (Yes/No)** \_\_\_\_\_

\_\_\_\_\_

**Medication (Yes/No)** \_\_\_\_\_

If yes

\_\_\_\_\_

\_\_\_\_\_

**Special Dietary needs** \_\_\_\_\_

\_\_\_\_\_

**Vaccinations (Yes/No)** \_\_\_\_\_

If yes

\_\_\_\_\_

\_\_\_\_\_

**Have they had any childhood illnesses? (Yes/No)** \_\_\_\_\_

If yes

\_\_\_\_\_

\_\_\_\_\_

**Any Special words they associate with? (Yes/No)** \_\_\_\_\_

If yes

\_\_\_\_\_

**Any comforters that they may have? (Yes/No)** \_\_\_\_\_

If yes

\_\_\_\_\_

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## Minibus Consent Form

Name of Child: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

### Mini Bus Consent Form

\*I agree/disagree for you to take my child/children out on outings on the nursery mini bus.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\*please delete whichever is not applicable

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