Parkway Pre-School

Christchurch Community Centre, 110 Parkway, Welwyn Garden City, Herts. AL8 6HN

[www.parkwaypre-school.co.uk](http://www.parkwaypre-school.co.uk)

REGISTRATION FORM

|  |  |  |  |
| --- | --- | --- | --- |
| Child’s First Name | Preferred Name | Surname | Date of Birth |
|  |  |  |  |
| Birth Certificate Number | NHS Number | DFE Ethnic Code | Home Language |
|  |  |  |  |
| Address | | Town | Postcode |
|  | |  |  |
| Mum | Surname | Tel | Mobile |
|  |  |  |  |
| Dad | Surname | Tel | Mobile |
|  |  |  |  |
| Mum’s Email | |  | |
|  | |  | |
| Carer/Childminder | Tel | Mobile |  |
|  |  |  |  |
| Emergency Contact | Tel | Mobile | Relationship |
|  |  |  |  |
| Attendance: If possible, I would like my child to attend on the following days… | | | |
| MON TUE WED THU FRI | | | |
| Starting Term | Year | Start Date |  |
|  |  |  |  |
| Funding: Once my child is funded, I will be sharing this funding with another setting/carer as follows… | | | |
| Setting/Carer | Tel/Mobile | Parkway Hours/Week | Away Hours/Week |
|  |  |  |  |
| Agreement | | | |
| I have read and hereby agree to the Terms and Conditions of Parkway Pre-School (given overleaf). | | | |
| Parent Signature |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Medical Data | | | |
| Doctor’s Name |  | Surgery |  |
| Allergies/Food Intolerance |  | | |
| Special Medication |  | | |
| Emergency Medical Consent | | | |
| I hereby give my consent for the staff of Parkway Pre-School to authorise the provision of emergency medical treatment for my child on the understanding that they will do everything possible to contact me beforehand. | | | |
| Parent Signature |  | Date |  |

TERMS and CONDITIONS

Registration

To register your child for a place at Parkway Pre-School you will need to complete our Registration Form and provide a photocopy (or a photo) of your child’s Birth Certificate. If you are unable to send this online, please bring a photocopy with you on your child’s first day.

Fees

Your first invoice will include a one-off registration fee of £25. Attendance fees are calculated on a sessional basis and exclude bank holidays. They are charged termly in advance and can be paid online.

If you are unable to pay the full fee in advance, we will accept half-termly payments, beginning at the start of each half-term. No discounts or refunds are available for holiday or sickness absence, special events that replace the normal session (usually held on a Friday), or closure due to severe weather conditions. Please also be aware that sessions are not transferable - an absent child cannot give their session to another child or swap it for another day.

Funding

When your child becomes eligible for funding you will be required to define your claim on a Parent Declaration Form at the beginning of each term. You may claim up to 15 hours per week at Parkway and share this, plus additional 30-hour funding, with another setting or carer. Before you complete this form, please consider your options carefully as the funding system won’t allow you to alter your claim mid-term.

Childcare Vouchers

Childcare vouchers must be set up in advance to ensure that we are in receipt of funds in your child’s first week. If they do not arrive in the first 4 weeks, the full fee will become due.

Notice

We require 6 weeks notice in writing if you wish to cancel your place at the pre-school or reduce the sessions allocated. Any refund will be calculated accordingly. If you are claiming funding, you may cancel without notice, but you will need to complete a Leaving Certificate to take your remaining funding elsewhere.