SPRINGFIELD ROAD DAY NURSERY LTD

61 SPRINGFIELD ROAD
BURY ST. EDMUNDS
SUFFOLK
IP33 3AS
TEL: (01284) 753902
EMAIL: info@springfield-nursery.org.uk
WEBSITE: springfield-nursery.org.uk

SPRINGFIELD DAY NURSERY

• Learning by Doing •

ENROLMENT FORM

Please complete and return this form **before** your child begins at Springfield Road Day Nursery Ltd. If you have any difficulty in filling out any part of this form a member of staff will be more than happy to assist you.

Family Name

Child's Name(s)

Child's preferred name (if different)

Gender Date of Birth Due Date

Proof needed of child's name and DOB to be seen by nursery.

Home Address

Postcode

Mobile Number Telephone number

Please inform us if you change your number

To enable us to send you updates of your child's time at nursery, we use the Famly app. To be able to set up a log in for you to access your child's information please could you provide us with your email addresses.

Parent 1 Email Parent 2 Email

Identification. Please supply original passport or birth certificate for your child

Office use. Record number

Parent National Insurance Number Parent D.O.B.

Parent/Carers' name

Parent/Carers' work contact details (where applicable)

1

Telephone Number

2

Telephone Number

Child's first language

Other languages(s) spoken at home

Religion Ethnicity

Name of Child's Doctor

Doctor's address

Telephone Number

Please indicate below to show your child's immunisations;

Routinue childhood immunisations

When	Diseases protected against	Vaccine given	Indicate Yes/No	
Eight weeks old	Diphtheria, tetanus, pertussis (whopping cough), polio, *Haemophilus influnzae* type b (Hib) and hepatitis B	DTaP/IPV/Hib/HepB	Yes ☐	No ☐
	Meningococcal group B (MenB)	MenB	Yes ☐	No ☐
	Rotavirus gastroenteritis	Rotavirus	Yes ☐	No ☐
	Pneumococcal (13 serotypes)	PCV	Yes ☐	No ☐
Twelve weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Yes ☐	No ☐
	Rotavirus	Rotavirus	Yes ☐	No ☐
Sixteen weeks old	Diphtheria, tetanus, pertussis, polio, Hib and hepatitis B	DTaP/IPV/Hib/HepB	Yes ☐	No ☐
	MenB	MenB	Yes ☐	No ☐
	Pneumococcal (13 serotypes)	PCV	Yes ☐	No ☐
One year old (on or after the child's first birthday)	Hib and MenC	Hib/MenC	Yes ☐	No ☐
	Pneumococcal	PCV booster	Yes ☐	No ☐
	Measles, mumps and rubella (German measles)	MMRV	Yes ☐	No ☐
	MenB	MenB booster	Yes ☐	No ☐
Eligible paediatric age group	Influenza (each year from September)	Live attenuated influenza vaccine LAIV	Yes ☐	No ☐
Three years four months old or soon after	Diphtheria, tetanus, pertussis and polio	DTaP/IPV	Yes ☐	No ☐
	Measles, mumps and rubella	MMRV (check first dose given)	Yes ☐	No ☐

Medicines should always be provided in the original container as dispensed by a pharmacist and should include the prescriber's insructions for administration.
In all cases this should include, name of child, name of medicine, dose, method of administration, time/frequency of administration, any side effects and the expiry date.

Calpol will not administered, unless directed by a medical professional.

Allergies, does your child have any known allergies other than to any food types? Yes ☐ No ☐
If yes, please give details. We will need to complete a risk assessment and health care plan.

Food Allergies

To keep all children safe it is important that we are aware of any allergies your child may have, or if they have come in to contact with any of the following allergens. Let us know if any contact with an allergen has caused a reaction. Please give more detail if you answer yes to any of the allergens. If your child has any known allergies we will need you to complete a food risk assessment and health care plan before starting so that all staff know what to do in case of an emergency. Depending on the age of your child we may need to regularly review this list as some of the allergens may not be relevant when you start.

Allergens, taken from Food Standards Agency, www.food.go.uk

Allergen	Known Allergy	Been in contact/eaten	Caused a reaction
Celery - this includes celery stalks, leaves, seeds and the root called celeriac. You can find celery in celery salt, salads, some meat products, soups and stock cubes.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Cereals - containing gluten Wheat (such as spelt and Khorasan wheat/Kamut), rye, barley and oats is often found in foods containing flour, such as some types of baking powder, batter, breadcrumbs, bread, cakes, couscous, meat products, pasta, pastry, sauces, soups and fried foods which are dusted with flour.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Crustaceans - Crabs, lobster, prawns and scampi are crustaceans. Shrimp paste, often used in Thai and south-east Asian curries or salads, is an ingredient to look out for.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Eggs - often found in cakes, some meat products, mayonnaise, mousses, pasta, quiche, sauces and pastries or foods brushed or glazed with egg.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Fish - found in some fish sauces, pizzas, relishes, salad dressings, stock cubes and Worcestershire sauce.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Lupin - lupin is a flower, but it's also found in flour. Lupin flour and seeds can be used in some types of bread, pastries and even in pasta.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Milk – a common ingredient in butter, cheese, cream, milk powders and yoghurt. It can also be found in foods brushed or glazed with milk, and in powdered soups and sauces.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐

Allergen	Known Allergy	Been in contact/eaten	Caused a reaction
Molluscs - mussels, land snails, squid and whelks, but can also be commonly found in oyster sauce or as an ingredient in fish stews.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Mustard - Liquid mustard, mustard powder and mustard seeds fall into this category. This ingredient can also be found in breads, curries, marinades, meat products, salad dressings, sauces and soups.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Nuts - Not to be mistaken with peanuts (which are actually a legume and grow underground), this ingredient refers to nuts which grow on trees, like cashew nuts, almonds and hazelnuts. You can find nuts in breads, biscuits, crackers, desserts, nut powders (often used in Asian curries), stir-fried dishes, ice cream, marzipan (almond paste), nut oils and sauces.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Peanuts - Peanuts are actually a legume and grow underground, which is why it's sometimes called a groundnut. Peanuts are often used as an ingredient in biscuits, cakes, curries, desserts, sauces (such as satay sauce), as well as in groundnut oil and peanut flour.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Sesame seeds - These seeds can often be found in bread (sprinkled on hamburger buns for example), breadsticks, houmous, sesame oil and tahini. They are sometimes toasted and used in salads.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Soya - found in bean curd, edamame beans, miso paste, textured soya protein, soya flour or tofu, soya is a staple ingredient in oriental food. It can also be found in desserts, ice cream, meat products, sauces and vegetarian products	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐
Sulphur dioxide (sometimes known as sulphites) This is an ingredient often used in dried fruit such as raisins, dried apricots and prunes. You might also find it in meat products, soft drinks, vegetables as well as in wine and beer. If you have asthma, you have a higher risk of developing a reaction to sulphur dioxide.	Yes ☐ No ☐	Yes ☐ No ☐	Yes ☐ No ☐

Has your child had any major illness/operation? Yes ☐ No ☐ (If yes, please give details)

Has your child been in hospital recently? Yes ☐ No ☐ (If yes, please give details)

Does your child have any on-going health issues? Yes ☐ No ☐ (If yes, please give details)

Does your child have any distinguishing body marks, such as birth marks, Mongolian blue spot or scars? Yes ☐ No ☐ (If yes, please give details)

Has your child received support from any agencies such as Social Worker or Speech Therapist? Yes ☐ No ☐ (If yes, please give details)

Does your child have any individual requirements, requests or needs you would like us to observe in nursery? (For example, religious observance, food or clothing etc).

Is there any additional information that you feel we need to know in order to help us meet your child's individual needs?

Name(s) and relationship (to child) of any person you have authorised to collect your child from nursery on a regular basis.

Has your child previously attended:
A parent and toddler pre-school?

A pre-school?

Another nursery?

When is your child expected to start school and which school? (If known)

To provide the children with new experiences we occasionally have animals brought into the nursery.
If you are happy for your child to take part.

Please indicate Yes ☐ No ☐

Date _____ Signature _____

We also seek your permission for images to be used for the following:

Famly App Yes ☐ No ☐ Newspaper Yes ☐ No ☐ Newsletter Yes ☐ No ☐

Display Yes ☐ No ☐ Internet Yes ☐ No ☐

Date _____ Signature _____

EMERGENCY CONTACT DETAILS
It is really important for Springfield Road Day Nursery Ltd to be able to contact you (or another named individual) in the event of an emergency whilst your child is attending a nursery session. We therefore ask that details of all numbers you can be contacted on (during your child's nursery sessions) are recorded below. We also require that, where possible, an additional name and telephone number is included in case you are not contactable, for example, a relative, friend or neighbour.

Your emergency contact details:

Home _____ Mobile _____

Work (where applicable) _____ Other _____

ADDITIONAL CONTACT NAMES(S) AND TELEPHONE NUMBER(S)

1. Name _____ Relationship to child _____

Contact number _____

2. Name _____ Relationship to child _____

Contact number _____

ADDITIONAL CONTACT NAMES(S) AND TELEPHONE NUMBER(S) *Contd.*

3. Name _____ Relationship to child _____

Contact number _____

PLEASE LET SPRINGFIELD ROAD DAY NURSERY LTD KNOW IF ANY OF THIS INFORMATION CHANGES WHILST YOUR CHILD IS AT NURSERY.

You may in the future require a 'safe' word, if someone new to the setting will be collecting your child. Please confirm a word that you would like to use. We recommend something memorable such as a pet's name.

The safe word I have selected is _____

Signed _____

Are there any people that you do not wish your child to be collected by?

_____

Please note, you may be asked to provide photographs of these people for the nursery to keep.

Permission to seek emergency medical treatment Yes ☐ **No** ☐

Signed _____

If NO please give details of arrangements you wish to make:

_____

Contact details

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TEL: (01284) 753902

EMAIL: info@springfield-nursery.org.uk
WEBSITE: springfield-nursery.org.uk

OWNERS: Sarah Orford (Manager) BA Hons Education
Celia Orford (Director) (PGCE)

Deputy Manager: Liz Cutter