

Child/Parent information

Child's full name:	
Preferred name:	
Date of birth:	
Birth Cert. No.	
Start date:	

To comply with the legal requirements of the EYFS framework, we are now required to obtain and retain the following information regarding the children in our care.

First Parent:	
Name:	Surname:
Address:	
Home telephone number:	
Mobile telephone number:	
Address of place of work:	
Work phone number:	

Child's home address:	Yes	No
Has parental responsibility: Office use	Yes	No
Is there a court order in place? Office use	Yes	No

A copy of the child's full birth certificate must be seen by the nursery

A copy of any court orders must be provided to the nursery



Second Parent:		
Name:	Surname:	
Address:		
Home telephone number:		
Mobile telephone number:		
Address of place of work:		
Work phone number:		

Child's home address:	Yes	No
Has parental responsibility: Office use	Yes	No
Is there a court order in place? Office use	Yes	No



Emergency contacts

First emergency contact:			
Name:	Surname:		
Address:			
Home telephone number:			
Mobile telephone number:			
Work phone number:			
Relationship to child:			
Authorised to collect with	out confirmation:	Yes / No	
Confirmation needed on t	he day:	Yes / No	

Second emergency contact:			
Name:	Surname:		
Address:			
Home telephone number			
Mobile telephone numbe	r·		
Work phone number:			
Relationship to child:			
Authorised to collect with	out confirmation:		
		Yes / No	
Confirmation needed on t	ine day:	Yes / No	

Please provide photographs of all those authorised to collect your child



Permissions

I authorise Monkey Puzzle staff to administer emergency infant	Yes / No
suspension Paracetamol if my child develops a temperature above 38 c	
and that if the staff do not manage to receive any permission from	
myself or any other emergency contact within 10minutes	
I authorise Monkey Puzzle staff to apply nappy barrier cream provided by	Yes / No
myself	
I authorise Monkey Puzzle staff to apply eczema creams provided by	Yes / No
myself	
I authorise Monkey Puzzle staff to apply sun cream provided by myself	Yes / No
I authorise Monkey Puzzle staff to administer prescribed medication	Yes / No
I authorise Monkey Puzzle staff to apply face paints	Yes / No
I authorise Monkey Puzzle trained first aiders to administer basic first aid	Yes / No
I authorise Monkey Puzzle staff to seek medical attention for my child in	Yes / No
the case of an emergency	

Photography/video images

I authorise Monkey Puzzle to use images of my child around the nursery	Yes / No
for display purposes	
I authorise Monkey Puzzle to use photo images of my child in their own	Yes / No
learning profile	
I authorise Monkey Puzzle to use video images of my child in their own	Yes / No
learning profile	
I authorise Monkey Puzzle to use photo images of my child in other	Yes / No
children's learning profiles or on artworks such as Celebration cards	
I authorise Monkey Puzzle to use video images of my child in other	Yes / No
children's learning profiles or on artworks such as Celebration cards	
I authorise Money Puzzle to use photo images of my child for training	Yes / No
purposes	
I authorise Money Puzzle to use video images of my child for training	Yes / No
purposes	
I authorise Money Puzzle to use photo images of my child for marketing	Yes / No
purposes	
I authorise Money Puzzle to use video images of my child for marketing	Yes / No
purposes	
I authorise Money Puzzle to use video and images of my child on	Yes / No
Facebook	
I authorise Monkey Puzzle staff to share information regarding my child's	Yes / No
developmental needs and progress with other settings and agencies if	
required	

Walks and outings

I authorise Monkey Puzzle to take my child off of nursery premises to	Yes / No
participate in educational walks	



Name:	Date:
Signed:	

Child's Immunisations

Please give details including dates of any immunisations your child has received to date; this information can obtained from your child's Red book.	

Name:	Date:
Signed:	