



Dear Parent/ Carer,

Many thanks for your recent enquiry about spaces at Bourton-on-the-Water Day Nursery Ltd.

Please find enclosed all the relevant paperwork you will require to reserve your child's space with us.

Enclosed in this pack you will find:

- o All about our nursery.
- o A reservation form.
- o A conditions of contract.
- o A medical form.
- o Parental responsibility.
- o Permissions.
- o Parent's guide to the EYFS.

Once again many thanks for your interest in Bourton-on-the-Water Day Nursery.



About us

Bourton-on-the-Water Day Nursery is a Children's Day nursery, caring for children from 3 months to 5 years. We are a privately-run Day nursery conveniently situated just off the A429 between Cirencester and Stow on the Wold.

The nursery opened in 2016 and is run and managed day to day by Hazel, who has 2 children herself, both active little boys. Since a very young age Hazel knew she wanted to be in childcare and as she gained more experience it became her dream to own her own day nursery. This is how Bourton-on-the-Water Day Nursery began! Hazel began her career as a nursery nurse, then progressed to room leader and as soon as an opportunity arose, she took on a manager role, where she gained many years of experience managing a large day nursery in Gloucester.

Hazel's partner in the business is Cathy. Cathy owns her own large, day nursery in Gloucester (where Hazel used to work). Churchdown Day Nursery Ltd has been established for over 20 years. It began as a small nursery in Cathy's family home, but as the business expanded, she created her own purpose setting built setting. Cathy has 2 grown up boys of her own and 5 beautiful grandchildren.

Bourton-on-the-Water Day Nursery is designed over 2 floors, the youngest children are housed on the top floor in a specially adapted under 2's unit and downstairs houses 5 additional playrooms for the slightly older children, the eldest children benefit from 2 playrooms giving the ability to split the group and focus on our letters and sound and group times in preparation for the transition to school. There is a large indoor/outdoor garden to the rear of the building which can be accessed by children of all ages allowing the children to have access to free flow indoor/outdoor environments.

Here at Bourton-on-the-Water Day Nursery we pride ourselves on providing a loving and caring environment with high standards of care. All our staff hold, or are working towards, nationally recognised qualifications and are all experienced childcare practitioners who have been chosen for their individual skills and aptitude for working with children. All our staff are trained in paediatric first aid and child protection and regularly attend training such as total communication training in order to develop their knowledge and experiences.



Throughout the nursery we operate a 'key person' system which allows your child to develop a close bond with a member of staff who will track your child's development and ensure that activities are planned to aid your individual child's development.

We have introduced an online learning journal called Family. Family is about capturing the magic of a child's early years experience, and recording children's learning in a way that is easy and fun.



Reservation Form

When reserving a place for your child/children please provide evidence of the following:

- ∞ The child's birth certificate.
- ∞ Any court orders pertaining to the child.
- ∞ £100 deposit which is deducted from your first month invoice, if for any reason the place reserved is not taken up the deposit is non-refundable.

Child's Name _____

Date of birth _____ Ethnicity _____

Language/s spoken at home _____

Address _____

Telephone Number _____

E-Mail _____

Requested start date _____

Sessions required

	8am - 1pm	1pm - 6pm	8am - 6pm
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Parents/Carers name _____

Parent/Carers signature _____



Conditions of Contract

This agreement is between Bourton-on-the-Water Day Nursery Ltd and the parent/ carer.

Name of Parent / Carer _____

Name of Child _____

Address _____

_____ Postcode _____

Start date _____

- ∞ Payments are to be made monthly in advance by cash or online. Bank details are found on the invoice.
- ∞ I/we understand that a deposit of £100 is taken on reservation of a nursery place, this is deducted from the 1st months invoice, however if the place is cancelled and not taken the deposit is non-refundable.
- ∞ Payments are to be received no later than 5th of the month. In the event of late payment a surcharge of £20 will be added.
- ∞ We accept all childcare vouchers.
- ∞ I/We agree that there is a small charge for food for those children in receipt of nursery funding, this will be charged monthly in advance for booked sessions.
- ∞ I/We accept that it is the parents/carers responsibility to ensure the 30 hour eligibility code is checked and renewed as and when required. In the case that you are no longer entitled to the 30 hours you will be charged appropriately until the 4 weeks' notice has been given to reduce hours.
- ∞ One months' notice is required on either side (or full fees in lieu of notice) to terminate this contract or to decrease sessions.
- ∞ There will be an additional charge of £5.00 per 15 minutes if your child is collected after the end of their session time.
- ∞ Fees are subject to an annual increase, but the nursery will ensure that you are informed of this in writing in advance.
- ∞ I/We understand that the nursery operates an open door policy to information and that I/we are welcome to view the policies and procedures under which it runs.
- ∞ I/We may arrange a meeting to discuss any problems or queries that we may have.
- ∞ I/We understand that children may need to be taken off of the premises in the case of an emergency.
- ∞ I/We will provide my/our child with nappies, wet wipes, nappy creams, a change of clothes, and sun hat and sun cream in the summer, or a coat and wellingtons in the winter.



- ∞ I/We will provide the nursery management with a security password should our child need to be collected by someone unfamiliar with the nursery.
- ∞ I/We agree that any holiday or sickness will still incur full fees.
- ∞ I/We have been made aware of current policies and procedures and agree to adhere to these at all times.
- ∞ I/We agree to keep the nursery up to date with any changes that may affect the health and well-being of my/our child.
- ∞ I/ We agree to inform the nursery as soon as possible if it will be someone different collecting at the end of the session.
- ∞ I/ We agree to adhere to nursery policies relating to illness and exclusion periods.
- ∞ I/We accept that should we be found to be presenting the nursery in a negative light that it may result in the cancellation of our child's place at the nursery.
- ∞ I/We accept that the use of threatening or abusive behaviour to staff, children and or parents may lead to the cancellation of our child's place at the nursery.
- ∞ I/We accept that there may be at times clerical errors that occur with billing, and that the nursery will work with us to resolve this issues swiftly. However, continual non-payment of bills may result in cancellation of your child's place at the nursery.
- ∞ I/We accept that if the nursery closes due to any unforeseen circumstances fees are still payable in full. This will then be reimbursed at a later date.
- ∞ I/We accept that twice a year (Christmas Eve and New Year's Eve) the nursery will close at 4pm to allow staff time off. This is payable in full.

Name of Parent/Carer_____

Signature of Parent/Carer_____

Date_____



Bourton on the Water Day Nursery

1 Willow Court

Bourton On The Water Industrial Estate

Cheltenham

GL54 2HQ

01451 810581

hello@bourtondaynursery.co.uk

Registration form

Child's details

Child's first
name(s)

Surname

Name known as

Child's full
address

Gender

Date of
birth

Birth certificate seen Yes
No

Family details

Name of parent(s)/carer(s) with whom the
child lives:



Contact details 1 (including emergency information):

Parent/carer full
name

Relationship to child

Daytime/work
telephone

Mobile

Home telephone

Email

Home address

Occupation

Work address

Does this parent have parental responsibility for the child? Yes No

Contact details 2 (including emergency information):

Parent/carer full
name

Relationship to child

Daytime/work
telephone

Mobile

Home telephone

Email

Home address

Occupation

Work address



Does this parent have parental responsibility for the child? Yes No

Contact details 3 (including emergency information):

Parent/carer full
name

Relationship to child

Daytime/work
telephone

Mobile

Home telephone

Email

Home address

Work address

Does this parent have parental responsibility for the child? Yes No

Other person(s) with legal contact *To be completed where those persons with parental responsibility are separated and an S8 Order is in place.*

Name

Address

Contact telephone
numbers

Relationship to
child

What are the contact arrangements that [we/I] need to be aware of?



Emergency contact details if parents are not available *Emergency contacts must be local.*

Contact 1 -
Name

Relationship to
child

Address

Daytime/work
telephone

Home
telephone

Mobile

Contact 2 -
Name

Relationship to
child

Address

Daytime/work
telephone

Home
telephone

Mobile

Persons other than parent(s) authorised to collect the child *Must be over 16 years of age. Please note that if the authorised person is not the person indicated on the daily signing in/out sheet, Bourton On The Water Day Nursery will check before releasing the child.*



Person 1 –
Name

Relationship to
child

Address

Daytime/work
telephone

Home
telephone

Mobile

Person 2 -
Name

Relationship to
child

Address

Daytime/work
telephone

Home
telephone

Mobile

Person 3 -
Name

Relationship to
child

Address



Daytime/work
telephone

Home
telephone

Mobile

Password for the collection of child by authorised
persons

About your child

The following information will tell Bourton On The Water Day Nursery a little more about your child. As your child settles with us, we will establish their starting points through observation and further conversation with you.

Does your child have previous experience of attending a childcare setting? If so, please specify:

Health and development

Has your child received the following immunisations? *Please confirm and provide date of immunisations given.*

**Two months
old**

5-in-1 (DTaP/IPV/Hib) vaccine - diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (Hib).

Yes No Date
 :



Pneumococcal (PCV) vaccine. Yes No Date :

Rotavirus vaccine. Yes No Date :

Three months old 5-in-1 (DTaP/IPV/Hib) vaccine, second dose - diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (Hib). Yes No Date :

Meningitis C vaccine. Yes No Date :

Rotavirus, second dose. Yes No Date :

Four months old 5-in-1 (DTaP/IPV/Hib) vaccine, third dose - diphtheria, tetanus, pertussis (whooping cough), polio and Haemophilus influenzae type b (Hib). Yes No Date :

Pneumococcal (PCV) vaccine, second dose. Yes No Date :

Between 12 and 13 months old Hib/Men C booster - Haemophilus influenza type b (Hib), fourth dose and meningitis C, second dose. Yes No Date :

MMR vaccine – mumps, measles and rubella. Yes No Date :

Pneumococcal (PCV) vaccine, third dose. Yes No Date :



Two to three years	Flu vaccine	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date
		<input type="checkbox"/>	:
Three years and four months or soon after	MMR vaccine, second dose – mumps, measles and rubella.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date
		<input type="checkbox"/>	:
	4-in-1 (DTaP/IPV) pre-school booster - diphtheria, tetanus, pertussis (whooping cough) and polio.	Yes <input type="checkbox"/> No <input type="checkbox"/>	Date
		<input type="checkbox"/>	:

For internal use: Has the child's health record book been seen to confirm immunisation dates? Yes No

Does your child have any on-going medical conditions? If so, please specify:

If yes, please specify which external agencies are involved e.g. Paediatrician, Consultant, Dietician, Speech and Language Therapist, etc:

Does your child require a health care plan? Yes No

Is your child known to have any allergies or food intolerances? If so, please specify:



A risk assessment will be completed and kept on the child's file for any known allergies or food intolerance as mentioned above.

What are your child's dietary requirements? Please specify:

It is Bourton On The Water Day Nursery's usual practice to provide both a meat and vegetarian option. If this is not in-keeping with your child's dietary requirements, please discuss this with staff to ensure that we are working in partnership to meet your child's needs. Please refer to our Food and Drink Policy.

If your child is aged three years or over, does he or she have difficulty with any of the following:

Speaking and communicating	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Listening and attending	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Understanding simple instructions	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Eating and drinking	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Sitting and sharing a book	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Walking and climbing	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	
Rolling a ball	Yes	<input type="checkbox"/>	N	<input type="checkbox"/>
			o	



-
- | | | | | |
|--|-----|--------------------------|---|--------------------------|
| Holding a crayon | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |
| Socialising with adults and other children | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |
| Using the toilet | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |
| Putting on their shoes and socks | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |

Any other concerns:

Does your child have any special needs or disabilities? If so, please specify:

Are any of the following in place for the child?

- | | | | | |
|---------------------------------------|-----|--------------------------|---|--------------------------|
| Early Years Action | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |
| Early Years Action Plus | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |
| Statement of special educational need | Yes | <input type="checkbox"/> | N | <input type="checkbox"/> |
| | | | o | |



What special support will he/she require in [our/my] setting?

Two year old progress check – children aged 24 – 36 months

If your child is aged between 24-36 months, has a two year old progress check already been completed for your child? Yes No

Setting completing
check

Date
completed

As per the requirements of the Early Years Foundation Stage [we/I] will complete a progress check on your child between the ages of 24-36 months. [We/I] will ask you to be involved in completing the check and will discuss it with you.

Cultural background

How would you describe your child's ethnicity or cultural background?

What is the main religion in your family (if applicable)?

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is in Bourton On The Water Day Nursery?



What language(s) is/are spoken at home?

If English is not the main language spoken at home, will this be your child's first experience of being in an English-speaking environment?

Yes N
o

Does your child need a bilingual support plan?

Yes N
o

If so, discuss and agree with the key person how we can work together to support your child when settling-in:

General information

What is your child's usual sleep pattern?

Does your child have a feeding routine (for children under 2 years)?

Yes N
o

Does your child have any food preferences?

Yes N
o

Does your child have a pacifier i.e. dummy or thumb?

Yes N
o



Does your child have a special toy or object they might bring with them? Yes No

What sort of things does your child enjoy doing at home, i.e. drawing or cooking?

What other information is it important for Bourton On The Water Day Nursery to know about your child? For example, what they like, or what fears they may have, or any special words they use.

Details of professionals involved with your child

GP

Name _____ Telephone _____
Address _____

Health Visitor (if applicable)

Name _____ Telephone _____
Address _____

Social Care Worker (if applicable)



Name _____ Telephone _____
Address _____

What is the reason for the involvement of the social care department with your family? *NB If the child has a child protection plan, make a note here, but do not include details. Bourton On The Water Day Nursery will ensure these details are obtained from the social care worker named above and keep these securely in the child's file.*

Dentist (if applicable)

Name _____ Telephone _____
Address _____

Any other professional who has regular contact with the child

Name 1 _____ Role _____
Agency _____ Telephone _____
Address _____

Name 2 _____ Role _____
Agency _____ Telephone _____



Address

Name 3

Role

Agency

Telephone

Address

General parental permissions

Emergency treatment declaration

In the event of an accident or emergency involving my child I understand that every effort will be made to contact me immediately. Emergency services will be called as necessary and I understand my child may be taken to hospital accompanied by staff at Bourton On The Water Day Nursery for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

Signed

Date

Printed
name

For inhalers/auto-injectors (e.g. Epipens) only

[For group provision:]

I give permission for a named member of staff who has been appropriately trained to administer the inhaler/

Epipen/Anapen supplied
by

(name of child).

The named staff are:

▪



-
-

Signed _____

Date _____

Printed
name _____

Teething gel (babies)

I give permission for teething gel (supplied by me) to be administered to _____
(*name of child*) when necessary - in accordance with manufacturer's instructions - and for staff to record its use.

Signed _____

Date _____

Printed
name _____

Nappy cream

I give permission for nappy cream (supplied by me) to be administered to _____
(*name of child*) when required, in accordance with manufacturer's instructions.

Signed _____

Date _____

Printed
name _____

Paracetamol based medicine (e.g. Calpol or Sudafed)

I give permission for Bourton On The Water Day Nursery to administer paracetamol based products (e.g. Calpol) to



(name of child) in the case of a raised temperature and on the
_____ understanding that I will be making arrangements for my child to be collected as soon as possible in accordance with the setting's procedures on the administration of medicines.

Signed _____ Date _____

Printed name _____

Suncream

I give permission for Bourton On The Water Day Nursery to administer hypoallergenic suncream (supplied by the setting) to

_____ (name of child) when necessary and to record its use.

Signed _____ Date _____

Printed name _____

Short trip - general outings

Your child will be taken out of Bourton On The Water Day Nursery setting as part of the daily activities. The venues used are detailed here:

I give permission for _____ (name of child) to take part in short trips or



general outings. I understand that individual risk assessments are carried out for each type of trip or outing taken and are available for me to see as required. For any major outings, I understand I will be informed and my specific consent obtained.

Signed _____

Date _____

Printed
name _____

Photographs

As part of the on-going recording of our curriculum and for children's individual development records (Family online journal), Bourton On The Water Day Nursery regularly take photographs and videos of the children during their play. Only cameras supplied by the setting are used for this purpose, photographs taken are used for display and for your child's records within the setting. Photos/videos are stored on the setting's computer only; Bourton On The Water Day Nursery only store images during the period your child is with us.

I give
permission for _____

(name of child) to have her/his photo taken,
or to be

videoed, as per the above conditions.

Signed _____

Date _____

Printed
name _____

We currently have a business Facebook page, which is public. From time to time we share some photo's or short videos of the children so you can see them at home and share what we do if you wish. We would like your permission to share some photos and short videos of your child on this page. Children will not be identified on this page.

I give
permission for _____

(name of child) to have her/his photo taken,
or to be

videoed, as per the above conditions.

Signed _____

Date _____



Printed
name

Animals

Bourton On The Water Day Nursery may occasionally have supervised visits of animals to our setting

A risk assessment will be carried out for visiting animals, and parents informed.

Please state below any known allergies or
aversion

(name of child) has to
animals:

Signed

Date

Printed
name

Key persons - Information for parents

Each child joining the setting will have a key person appointed to them. It will be the key person's responsibility to ensure that your child receives the best possible attention whilst in Bourton On The Water Day Nursery's care and to ensure that their records are kept up-to-date. Your child's key person may change as your child progresses through the setting. You will be notified of these changes. Your child's key person is your first point of contact for anything you wish to discuss about your child.

Equalities monitoring form



Ethnicity - Gathered for monitoring purposes only. Parents are not obliged to complete this data.

- | | | | |
|--------------------|--------------------------|---------------------------|--------------------------|
| White British | <input type="checkbox"/> | Pakistani | <input type="checkbox"/> |
| White Irish | <input type="checkbox"/> | Indian | <input type="checkbox"/> |
| White other | <input type="checkbox"/> | Asian other | <input type="checkbox"/> |
| Black British | <input type="checkbox"/> | Chinese | <input type="checkbox"/> |
| Black African | <input type="checkbox"/> | Chinese other | <input type="checkbox"/> |
| Black Caribbean | <input type="checkbox"/> | White and Black Caribbean | <input type="checkbox"/> |
| Black Other | <input type="checkbox"/> | White and Black African | <input type="checkbox"/> |
| Bangladeshi | <input type="checkbox"/> | White and Black Asian | <input type="checkbox"/> |
| Other please state | <hr/> | | |

A child's learning difficulties and disabilities status should be recorded according to the following categories:

- | | |
|-----------------------------|--------------------------|
| No special educational need | <input type="checkbox"/> |
| Early Years Action | <input type="checkbox"/> |
| Early Years Action Plus | <input type="checkbox"/> |
| Statement | <input type="checkbox"/> |

Providers should refer to the SEN Code of Practice for an explanation of the terms above.