

Milkshake Montessori School

Nursery Toddler/Pre-School Registration Form

Child's full name:

Date of Birth:

Phone:

Current Address:

Town:

County:

Postal Code:

Name of Mother:

Home address;

Home tel. no.

Mobile;

Email;

Business tel. no

Password;

Name of Father;

Home address;

Home tel no;

Town:

County:

Postal Code

Mobile

Email;

Business tel no;

Name of child's doctor;

Address:

Town:

County:

Postal
Code:

Phone:

Please give details of any allergies;

Diet – Please give details if your child should not be given any foods or drinks on medical or religious/cultural grounds;

Relatives/friend who may be contacted in the unlikely event of an emergency during nursery hours

Name;

Tel;

Relation to child;

Is there anything else we should know about your child?

Please note; for security purposes a passport size photograph of your child is required on admission

Enclosed;(please tick)

I wish to apply for admission for the above named child for the following days;

Start date;	Full day	Morning	Afternoon	Early Shake	Late Shake	Lunch
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						

I enclose a registration fee of £200.00 P/T, £400.00 F/T refundable against last month's fees

(where 1 months notice has been given)

Signed.....Date.....

Please make cheques payable to "Milkshake Montessori School" and return to; 131 Warren Road
Whitton, TW2 7DJ

Milkshake Montessori School

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I/We

Hereby give permission for the staff at Milkshake Montessori School/Nursery all of the following eventualities/activities;

Signature of parents;

Date:
(Please tick)

Permission for the staff at Milkshake Montessori to administer First Aid, including the administering of prescribed drugs, in the event of an emergency, provided that the members of staff are suitably qualified.

In a emergency , when a parents' attendance cannot be immediate, it may be necessary to obtain treatment for a child from a doctor or casualty department/ or in the event of a sudden illness or accident, where emergency treatment, including any operative treatment and/or administration of a general anaesthetic to my child

We sometimes place pictures of the children in the nursery on our website (www.milkshakemontessori.co.uk). We also take photos for evidence of children's learning, displays and school productions. We need parent's permission for this.

Permission for staff at Milkshake Montessori School to apply a plaster to my child if he/she requires one.

Permission for the staff at Milkshake Montessori to escort him/her on outings by nursery bus/coach/car/ on foot provided that my child is adequately supervised and suitable child restraints are used, where applicable.

Permission for the application of sunscreen lotion/ nappy rash cream, which is to be provided by the parent and labeled with child's name on it.

I hereby give confirmation that my child has not suffered any adverse reaction after using this product.

Permission to use the garden Climbing Frame/ (Loft in Toddler Room).

Children will be fully supervised by members of staff at all times. Safeguards are in place, however in the case of any accident, procedures will be in line with our accident policy. (See Policies and Procedures).

The Data Protection Act 1998

All information about children is stored on computer. It is available for you to see at anytime.

This information is only available to members of staff at Milkshake Montessori School, Richmond Borough Council and OFSTED.

Permission to give Calpol suspension to my child, should she have a headache or fever.

I have read and accept all terms and conditions of the Milkshake Montessori Nursery School

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The programme started in Sweden and schools in Britain are now taking part. Children wear their normal school clothes and give massage to each other on the back, head and arms. They take part in ten to fifteen minutes massage daily.

Studies have shown that, when children give massage to each other, they become calmer, concentrate better and have more confidence. They learn to respect themselves and other children. Each child gives permission for massage to take place. If children do not want to give or receive massage they sit and watch.

The class teacher may observe the children before the programme starts and then at intervals to monitor the effect of massage on individual children and the whole group. Parents can help to make teachers aware of changes in their child at home by completing an observation sheet before massage begins and at other intervals. If parents notice anything of particular interest they can let the teacher know.

I will allow my child to decide if she/he wishes to take part in giving and receiving clothed massage as part of the Massage in Schools Programme.

Parent's signature Date

Child Name:

	Never	Rarely	Occasionally	Often	Usually	Always
Calm behavior						
Co-operates with parents						
Co-operates with brothers /sisters						

Please observe your child's behavior at home and take note any changes which you think may be due to the project being done at school. If you notice anything of particular interest you can let your child's teacher know about it.

You may be asked to fill in another form like this at a later stage.

Please place a tick in the box which best describes your child's behavior.