Ready Steady Grow Pre-School

Registration form

Ready Steady Grow Pre-School, St Mary's Church, Green Street Green, Kent, BR6 6AG
Tel: 07876 480617 **E-mail:** info@readysteadygrowpreschool.co.uk

Child's details

Child's first name(s) _____ Surname _____

Name known as _____

Child's full address _____

_____

Sex _____ Date of birth _____

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 _____

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 _____

Work address _____

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

Name _____

Address _____

Contact telephone numbers _____

Relationship to child _____

What are the contact arrangements that we need to be aware of?

Emergency contact details if parents are not available. In line with the current EYFS, where possible we ask families to provide more than two emergency contact numbers. Please tell us separately who is authorised to collect your child and any restrictions that apply.

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

Password for authorised person to collect child (if not known by us)

About your child

Start Date:

Days your child is attending & session (please circle)

9 / 9.15am (please circle) – 12.15pm	Mon	Tue	Wed	Thu	Fri
12.15-3.15/4pm	Mon	Tue	Wed	Thu	n/a
Extra time pm 3.15-4pm	Mon	Tue	Wed	Thu	n/a
Optional Lunch Club (please circle):	Mon	Tue	Wed	Thu	n/a

12.15pm-12.45pm £6.00 per day. Please bring a packed lunch.

Private and funded session times/charges are set out in the setting's current Fees and Funded Entitlements information. Funded early education is delivered in line with the London Borough of Bromley Provider Agreement and current DfE requirements. Funded hours are free to parents; any additional private hours, meals, consumables or optional services are clearly identified and are not a condition of taking up a funded place. Please confirm your agreed attendance pattern with the setting.

The following information will tell us 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

Is your child up to date with routine childhood immunisations? Yes / No / Not known / Prefer not to say. Please tell us about any health information relevant to safe care. Immunisation information is used only where necessary for health protection and outbreak management.

Does your child have any on-going medical conditions including allergies or food intolerances? If so, please specify:

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

Please tell us about any areas where your child may need additional support. The prompts below are optional and should be considered in relation to your child's age and stage of development:

Speaking and communicating	Yes	□	No	□
Listening and attending	Yes	□	No	□
Understanding simple instructions	Yes	□	No	□
Eating and drinking	Yes	□	No	□
Sitting and sharing a book	Yes	□	No	□
Walking and climbing	Yes	□	No	□
Rolling a ball	Yes	□	No	□
Holding a crayon	Yes	□	No	□
Socialising with adults and other children	Yes	□	No	□
Using the toilet	Yes	□	No	□
Putting on their shoes and socks	Yes	□	No	□

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?

SEN Support / targeted support plan

Education, Health and Care Plan

Please indicate whether you consent to the setting liaising with relevant professionals to support your child. We will normally involve you and seek consent where appropriate. Information may be shared without consent where there is a lawful safeguarding or other legal basis, in line with our Information Sharing and Privacy policies.

EYFS progress check at age two - children aged between 2 and 3

Has your child had their 2-to-2-and-a-half-year health and development review with the health visiting team? Yes / No

If available, please share relevant information from that review so we can build a joined-up

picture of your child. Sharing a copy is encouraged where helpful but is not a condition of admission.
If your child is aged between 2 and 3, has an EYFS progress check at age two already been completed at another early years setting? Yes / No (if yes, please share the written summary if available).

Setting completing check _____ Date completed _____

Cultural background

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

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

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 ☐ No ☐

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. We will ensure these details are obtained from the social care worker named above and keep these securely in the child's file.*

Any other professional who has regular contact with the child

Name 1 _____ Role _____

Agency _____ Telephone _____

Address _____

Name 2 _____ Role _____

Agency _____ Telephone _____

Address _____

September 2026 statutory and Bromley update

This registration form should be read with the setting's current Privacy Notice and policies. It has been updated for the EYFS statutory framework for group and school-based providers effective 1 September 2026 and current London Borough of Bromley funded-entitlement arrangements.

Emergency contacts: where possible, the setting should hold more than two emergency contact numbers for each child. Please provide additional emergency contact details to the setting if the spaces above do not give us more than two usable numbers.

Safeguarding and attendance: please tell us about any court orders, child arrangements, restrictions on collection, social care involvement, child protection or child-in-need arrangements, looked-after/previously looked-after status, or other information needed to keep your child safe. We will follow up unexplained, prolonged or concerning absence in accordance with the EYFS and our safeguarding procedures.

Health, allergy and safer eating: please provide current information about allergies, intolerances, choking/swallowing risks, dietary requirements, medical conditions, emergency medicines and any individual health/allergy plan. Tell us immediately if any of this information changes.

SEND and inclusion: please tell us about your child's strengths, communication, sensory, physical, developmental or learning needs and any reasonable adjustments that may help. Support is based on need; a formal diagnosis is not required before the setting considers reasonable adjustments or SEN support.

Data protection: only information necessary for childcare, safeguarding, legal, funding and agreed service purposes will be collected and used. Consent is not the only lawful basis for processing. Safeguarding information may be shared without consent where necessary and lawful. Parents/carers should read the current Privacy Notice for lawful bases, retention, data-sharing, rights and complaints information.

Please notify the setting promptly of changes to contact details, parental responsibility, emergency contacts, authorised collectors, health/allergy/medication information, court orders, safeguarding circumstances, SEND needs or professionals involved.

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 the manager or the authorised deputy for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

Signed _____ Date _____

Printed name _____

Emergency medicines such as inhalers and adrenaline auto-injectors

I give written permission for an appropriately trained and competent member of staff to administer the emergency medicine supplied for my child, in accordance with the child's current health care plan, pharmacy label/prescriber instructions and the setting's Administering Medicines Policy, to:

_____ (*name of child*).

Staff authorised/competent to administer (setting use):

- _____

- _____

Signed _____ Date _____

Printed name _____

Nappy cream

I give permission for nappy cream supplied for my child to be applied when required, in accordance with the manufacturer's instructions and the setting's intimate-care/nappy-changing procedures.

Yes / No

(delete as appropriate)

Paracetemol based medicine (Calpol)

I give written permission for the setting to administer the following named paracetamol-based medicine supplied for my child, only in accordance with the setting's Administering Medicines Policy and the manufacturer/prescriber instructions. The setting will check the child's age, dose, timing of any previous dose and relevant contraindications, record each administration and inform me the same day or as soon as reasonably practicable. This permission does not remove the need for staff to assess whether my child is well enough to remain at the setting. Medicine name/strength: _____ Yes / No

Suncream

I give permission for staff to apply sun cream supplied for my child when necessary, following the product instructions and any individual allergy/skin-care information provided by me, and to record its use where required. Yes / No

Photographs

Only setting-authorised equipment and approved secure systems are used to take or store photographs/videos. Images are used only for the purposes covered by the consent choices below and our Privacy Notice/Online Safety Policy. We do not routinely send identifiable group photographs of children to other families through WhatsApp. Where a group image is proposed for a specific purpose, we will ensure the relevant permissions and safeguarding/privacy controls are in place. I give permission for photographs/videos of my child to be used in their secure learning record: Yes / No Yes / No

WhatsApp

Are parents/carers happy to receive routine setting messages from us via WhatsApp? Please note that safeguarding, medical and other sensitive personal information will be handled through an appropriate secure method rather than a parent group chat. Yes / No

Are parents/carers happy to be added to our pre-school WhatsApp group for general updates? Joining is optional. Other group members may be able to see your profile name/number. Please do not share confidential information or images of other children in the group. Yes / No

Online System

Are parents/carers happy for the setting to use its approved online childcare-management system for registration information, learning/development records, communications and invoicing, in accordance with our Privacy Notice?

Yes /No

Animals

We may occasionally have visits from animals on site. A risk assessment will be carried out for visiting animals and parents informed. Please state below any known allergies or aversions your child has:

_____

Policies and procedures

I have been made aware of Ready Steady Grow's current early years policies and procedures, including the Privacy Notice, Information Sharing Policy, Safeguarding and Child Protection Policy, Administering Medicines Policy and Online Safety/Device Policy. I understand that information may be shared with professionals or agencies without consent where this is necessary and lawful for safeguarding or another legal duty. Policies are available on the setting website. Yes / No

To secure your child's place please ensure you have paid the £40.00 deposit. Where a deposit is taken in connection with a funded place, it will be refunded in full within a reasonable timescale after the child starts, in line with the current Bromley Provider Agreement. The deposit is not a top-up fee and does not affect access to funded hours. Any payments should be made online to: Karen Lockley Sort code: 60-83-71 Acc No: 05499380

Please sign below to indicate that the information given on this form is accurate and correct, and that you will notify us of any changes as they arise.

Parent name _____

Signed _____ Date _____

Equalities monitoring form

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

White British	□	Pakistani	□
White Irish	□	Indian	□
White other	□	Asian other	□

Black British	□	Chinese	□
Black African	□	Chinese other	□
Black Caribbean	□	White and Black Caribbean	□
Black Other	□	White and Black African	□
Bangladeshi	□	White and Black Asian	□

Other please state _____

Please indicate any current SEND support or plan, if applicable:

No special educational need □

SEN Support / targeted support plan □

Education, Health and Care Plan □

The setting follows the SEND Code of Practice: 0 to 25 years (January 2015, as currently applicable), the Equality Act 2010 and current EYFS requirements. A diagnosis is not required before reasonable adjustments or appropriate SEN support can be considered.