

Medical Information

Name and Address of Child's Doctor Telephone Number	
Is your child registered with a dentist? If so please give details.	Dentist Details: No Yes
Details of immunisations already received	
Is your child currently receiving any medical treatment? If so please give details.	
Please give details of any known allergies/medical problems/recent operations Eg. Asthma, Eczema, Diabetes, Epilepsy. Please list any medication currently prescribed to your child	
Are there any other professionals currently working with your child?	
Are there any other professionals who have worked with your child?	
Is there any other information that you would like to share with Tysoe Children's Group	
Food	
Dietary preference (please tick)	None <input type="checkbox"/> Vegan <input type="checkbox"/> Vegetarian <input type="checkbox"/> Other:

Procedure

- Carefully read the prospectus, especially the Terms and Conditions
- Check that your child meets the enrolment criteria, as detailed above.
- Contact the Centre Manager to check availability for the required sessions.
(Sessions, if available, will be provisionally booked at this stage, otherwise we operate a waiting list system)
- Complete the Registration form, signed and dated accordingly.
- Return the registration form, together with your non-refundable deposit of £50 for Pre-School Registration (including free sweatshirt/polo shirt) OR Return the registration form, together with your non-refundable deposit of £20 for Wrap Around Cover / Holiday Club School Registration

You can scan/photograph and email us your form to admin@tysoechildrengroup.co.uk and you can pay your fee online via debit card here: <https://tysoechildrengroup.square.site/>

Postal Address: Tysoe Children’s Group, The Old Fire Station, Main Street, Tysoe, Warwickshire, CV35 0SR

I HAVE RECEIVED, READ AND SIGNED A COPY OF THE TERMS AND CONDITIONS AND AGREE TO COMPLY WITH THEM

Print Name:

Parent/Carer/Guardian Signatures

Date

GIFT AID If you are a UK tax Payer, please donate your registration fee. This will enable Tysoe Children’s Group Ltd to claim an additional 25% in Gift Aid. You must pay an amount of income tax and/or capital gains tax equal to the tax we reclaim on your donation. Tick here if you would like us to reclaim tax on your donation. YES

For Staff Use Only

Registration Fee Paid (date):	Method (Bacs, Cash, CHQ, Debit Card Online)	
Child Added To Blossom <input type="checkbox"/>	Form saved online to drive & filed <input type="checkbox"/>	
Information Gathering Date:	Birth Cert or Passport Seen <input type="checkbox"/>	
Settle In Session Date(s):	Official Start Date:	
Sessions (days and times):		
Term Time Only <input type="checkbox"/>	All Year Round <input type="checkbox"/>	
Parents Added to Xero <input type="checkbox"/>	Parents Added to Email List <input type="checkbox"/>	
Funding:		
None <input type="checkbox"/>	EEF 15 hours <input type="checkbox"/>	EEF 15 hours stretch <input type="checkbox"/>
EEF 30 Hours <input type="checkbox"/>	EEF 30 Hours Stretch <input type="checkbox"/>	2Help <input type="checkbox"/>
Funding Code Received: <input type="checkbox"/>		