Tigers Childcare Registration Form



CHILD INFORMATION

Child Name:		
Tigers Childcare Location:		
DETAILS OF PARENTS/GUARDIANS		
Name:		
Telephone No (day contact):		
Name:		
Telephone No (day contact):		
Home Address of either parent/guard	dian if different from child:	
With whom is child living?		
Nominated Emergency Contact		
Nominating an emergency contact in a position to collect your child in collected from the service.	is required. This person (usually a family member, friend or neigh the event that both parents are uncontactable, and your ch	bour) should be all dneeds to be
Name:		
Telephone No (day contact):		
Address:		
MEDICAL INFORMATION		
GP's Name:		
Telephone No (day contact):		
Address:		

Record of Vaccinations

Please tick and enter dates below:

Early Years/Pre-school Children

Age o Vaccination	Type of Vaccination	Yes / No	Date Received:
At 2 months	6 in 1 vaccine, PCV, MenB vaccine, Rotavirus oral vaccine		
At 4 months	6 in 1 vaccine, PCV, MenB vaccine, Rotavirus oral vaccine		
At 6 months	6 in 1 vaccine, PCV, MenC vaccine		
At 12 months	MMR, MenB vaccine		
At 13 months	Hib/MenC vaccine, PCV		

We ask parents to supply a copy of all vaccinations the child has received.





2. School Age Children

VACCINATION SCHEDULE FOR CHILDREN BORN ON OR AFTER 15T OCTOBER 2016						
Age in Months		2 months	4 months	6 months	12 months	13 months
	1	6 in 1 + PCV	6 in 1 + PCV	6 in 1 +	MMR + MenB	Hib/MenC +
		+ MenB +	+ MenB +	PCV + MenC		PCV
		Rotavirus	Rotavirus			
Date Received						
	VACCINATION SCHEDULE FOR CHILDREN BORN 1st JULY 2015 – 30TH SEPT 2016					
Age in Months		2 months	4 months	6 months	12 months	13 months
		6 in 1 + PCV	6 in 1 +	6 in 1 +	MMR + PCV	MenC + Hib
			Men C	PCV		
Date Received						
	VACCINATION SCHEDULE FOR CHILDREN BORN 1st OCTOBER 2010 – 30TH JUNE 2015					
Age in Months	Birth	2 months	4 months	6 months	12 months	13 months
	B.C.G.	6 in 1 +	6 in 1 +	6 in 1 +	MMR +	MenC + Hib
		PCV13	Men C	PCV13+	PCV13	
				MenC		
Date Received						

Does your child have any of the follo	owing (if not applicable please write n/a next to each heading)?	
Allergies:		
Additional Support Requirements:		
Disability:		
Illness/Medical Condition:		
medical needs or has a chronic con	attention that is required due to any of the above. If your child has dition you are required to complete a 'Healthcare Plan' in addition ebrile Convulsions, please indicate below:	, .
Tigers and the staff are unable to con	he event that my child's temperature remains raised above 38°C watact me or there is a delay in collecting my child. I give my authoricalpol or alternatively to immediately reduce the	isation to Tigers
Tigers and the staff are unable to con Childcare to provide my child with C	ntact me or there is a delay in collecting my child. I give my authori	isation to Tigers
Tigers and the staff are unable to con Childcare to provide my child with C	ntact me or there is a delay in collecting my child. I give my authorical policy and are the collection of the collectio	isation to Tigers
Tigers and the staff are unable to con Childcare to provide my child with C Parent/Guardian Name:	ntact me or there is a delay in collecting my child. I give my authorical policy and are the collection of the collectio	isation to Tigers

In the event of a medical emergency, I hereby give permission to the management of Tigers Childcare to act on my behalf in case of emergency or accident and take such action as necessary for the benefit of my child. This decision



Tigers Childcare Registration Form



is to be taken by the staff person in charge at the time of the emergency. This includes administration of emergency medication as authorised by you on your child's Emergency Action Plan.

Parent/Guardian Name:	_
Child Name:	_
Date:	_
ADDITIONAL INFORMATION	
Persons authorised to collect child (other than parent/guardian) Please confirm by ticking this box that the persons nominated below to collect your child is over 16 yrequirement under the Childcare Regulations (2016).	years old. This is a
Name(s):	_
Address:	_
Telephone No (day contact):	_ _
Name(s):	_
Address:	_
Telephone No (day contact):	_
Permission for Photographs/Videos I hereby give permission for my child to be photographed/video recorded at Tigers Childcare. Phomay be used for the following:	otographs/videos
 Printed photographs of my child to be used for learning portfolios Photographs or video of my child to be displayed within the centre Internal documentation such as centre-evaluations, internal staff training and internal manual Photographs or video of my child within a group of children to be shared via ChildPaths to parents as evidence of learning experiences Posted to Tigers Childcare Website, Social Media sites & Facebook Pages. 	Yes No
Parent/Guardian Name:	_
Child Name:	_
Date:	_
Permission to Change Clothes	
It may become necessary to change your child's clothing because of, for example, messy play or we	et/soiled clothing.
I hereby give permission to Tigers Childcare to change my child's clothing if required.	
Parent/Guardian Name:	_
Child Name:	
Date:	





Consent for Local Community Outings

In Tigers Childcare, we take part in outings to extend and enhance children's emerging interests as part of our child led curriculum. Regular outings in the local community provide varied, meaningful, and interesting learning experiences for children. Examples of these types of outing include buggy walks, going to a local shop to buy ingredients for baking, a trek to the local estate green area or park on a nature trail. Full details of local outings are available in our Outings policy (attached). An information leaflet is also attached.

Parents are welcome to request and/or contribute to the risk assessments carried out in respect of outings. Parents can change their mind about their child's involvement in outings after a child enrols.

I give permission for my child to participate in local community outings as described in Tigers Outings Policy.

Parent/Guardian Name:	
Child Name:	
Date:	
<u>Sunscreen Policy</u>	
Sunscreen is an essential part of keeping children safe in the sun. Per parents are asked to put sunscreen on their child in the morning (pr Tigers (recommendation from Early Childhood Ireland is to use SPF 3 for Tigers Childcare to apply sunscreen to your child. Signing below use the sunscreen held on site in the event that your child does no particular brands, please make a note of it below.	referably all-day sunscreen) before they arrive at 80 or higher) Please sign below to give permission also gives your permission for Tigers Childcare to
Parent/Guardian Name:	
Child Name:	
Allergies to known Brands:	
Date:	
<u>Infectious Diseases</u>	
I will notify the service as soon as possible if my child is diagnose meningitis, Diphtheria, Whooping Cough, Rubella, Covid-19.	ed with an infectious disease e.g. measles, viral
Parent/Guardian Name:	
Child Name:	
Date:	
<u>Data Privacy – Consent for Collection and Usage of your personal do</u>	<u>ata</u>
Must be signed by all parents/guardians whose information has bee	n supplied in this form.
Tigers Childcare collects personal data about you and your child tregistering your child for our services at Tigers Childcare you agree to in our 'Privacy Notice'.	
I have read the Privacy Notice and I consent to the collection and described therein.	d processing of the data given for the purposes
I understand that I can request a copy of this information and revise of the service.	or withdraw my consent at any time by contacting
Signature Parent/Guardian 1: Sig	gnature Parent/Guardian 2:





PARENT AGREEMENT

I have read the Parent Information Pack and the Policies & Procedures Document and in signing this agreement I confirm that;

- I have read and understood the Parent Information Pack and the Policies and Procedures
 document
- I agree to adhere to all stated policies and procedures.
- I understand that Tigers Childcare policies are periodically reviewed, and we reserve the right to amend existing policies/create new policies without prior notice and any new/updated policies will be communicated to parents as they arise.
- I have read and understood the service's Privacy Notice.
- I understand that Tigers Childcare is a business name owned by Tiger Time Limited.
- I understand that a booking deposit equivalent to one month's fee is payable to secure my child's place.
- I understand that by booking deposit will not be refunded if my child does not commence at the service.
- I understand that my booking deposit will not be refunded if I change the date on which my child commences at Tigers Childcare.
- I understand that my booking deposit cannot be transferred to another child.
- I understand, once my child commences at Tigers Childcare that my booking deposit will not be refunded if I remove my child from Tigers Childcare without giving 30 days written notice.
- I understand, the notice period to remove my child from Tigers Childcare increases to 60 days for children in the Active Cubs room.
- I understand, the notice period to remove my child from afterschool within an early years service is 60 days.
- Unless otherwise agreed, I agree to pay my fees in advance on the first of each month via direct debit.
- I understand that an administration fee may be charged if I do not pay my fees via direct debit.
- I understand that Tigers will be entitled to terminate service with immediate effect if any payment stands overdue by seven days or more and such termination will be without prejudice to Tigers' right to enforce all of its entitlements herein to include payment
- I understand that Tigers may charge an additional fee of €10.00 per day for each day that I am late in paying my fee.
- I understand that a registration administration fee of €30 is payable at the time of enrolment and is non-refundable.
- I understand that if I am late in collecting my child, a fee of €10.00 per minute, or part thereof, will be charged until such time as my child is collected.
- Although my child's homework may be completed in Tigers, I understand that it is my
 responsibility to check that it is done and signed.
- I have read the rules of behaviour management and understand that constant disruptive behaviour can lead to my child being excluded.
- I understand that I must re-register my child at Tigers for each new school year. Failure to do so may result in my child's place being lost.
- I understand that staff at the service have a responsibility as Mandated Persons to report any child welfare concerns.
- I understand that if I am availing of any childcare subvention schemes, my child cannot start at Tigers Childcare until such time as their registration has been confirmed by Pobal/DCEDIY.

Signed:	
_	
Print Name:	
Date:	



Unique Mandate Reference



SEPA Direct Debit Mandate



Unique Mandate Reference (UMR) - to be completed by Tiger Time Lxd)
By signing this mandate form, you authorise (A) TIGER TIME LTD to send instructions to your bank to debit your account and (B) your bank to debit your
account in accordance with the instructions from TIGER TIME LTD.
As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your personnent with your bank

account in accordance with the instructions from TIGER TIME LTD. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank.		
A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank. Please complete all the fields marked *		
Creditor's name	T I G E R T I M E L T D	
Creditor identifier	I E 3 4 S D D 3 0 6 6 1 9	
Creditor address	C O L L E G E B U S I N E S S &	
City	B A L L Y C O O L I N	
Post Code	B L A N C H A R D S T O W N	
Country	D U B L I N 1 5	
Type of payment *	Recurrent payment	
Debtor Name *		
Debtor Address		
City		
Post Code		
Country		
Debtor account number – IBAN *		
Debtor bank identifier code – BIC *		
Date of signature *		
Signature(s)		
Please sign here *		

Please return this mandate to the Creditor

