

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/guardian if different from child:

With whom is child living? _____

Nominated Emergency Contact

Nominating an emergency contact is required. This person (usually a family member, friend or neighbour) should be in a position to collect your child in the event that both parents are uncontactable, and your child needs to be collected from the service.

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

Does your child have any of the following (if not applicable please write n/a next to each heading)?

Allergies:

Additional Support Requirements:

Disability:

Illness/Medical Condition:

Please notify us of any special care/attention that is required due to any of the above. If your child has any long-term medical needs or has a chronic condition you are required to complete a 'Healthcare Plan' in addition to this form.

If your child has ever suffered from Febrile Convulsions, please indicate below:

As per Tigers Medication policy; In the event that my child's temperature remains raised above 38°C while attending Tigers and the staff are unable to contact me or there is a delay in collecting my child. I give my authorisation to Tigers Childcare to provide my child with Calpol or alternatively _____ to immediately reduce the temperature.

Parent/Guardian Name: _____

Child Name: _____

Date: _____

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



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 years old. This is a requirement under the Childcare Regulations (2016).

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. Photographs/videos may be used for the following:

- 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 wet/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 enrolls.

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

Parent/Guardian Name: _____

Child Name: _____

Date: _____

Sunscreen Policy

Sunscreen is an essential part of keeping children safe in the sun. Per our Sunscreen Policy, during the summer months parents are asked to put sunscreen on their child in the morning (preferably all-day sunscreen) before they arrive at Tigers (recommendation from Early Childhood Ireland is to use SPF 30 or higher) Please sign below to give permission for Tigers Childcare to apply sunscreen to your child. Signing below also gives your permission for Tigers Childcare to use the sunscreen held on site in the event that your child does not have their own. If your child is allergic to any particular brands, please make a note of it below.

Parent/Guardian Name: _____

Child Name: _____

Allergies to known Brands: _____

Date: _____

Infectious Diseases

I will notify the service as soon as possible if my child is diagnosed with an infectious disease e.g. measles, viral meningitis, Diphtheria, Whooping Cough, Rubella, Covid-19.

Parent/Guardian Name: _____

Child Name: _____

Date: _____

Data Privacy – Consent for Collection and Usage of your personal data

Must be signed by all parents/guardians whose information has been supplied in this form.

Tigers Childcare collects personal data about you and your child to provide care and education to your child. By registering your child for our services at Tigers Childcare you agree to the use of your personal information as described in our 'Privacy Notice'.

I have read the Privacy Notice and I consent to the collection and processing of the data given for the purposes described therein.

I understand that I can request a copy of this information and revise or withdraw my consent at any time by contacting the service.

Signature Parent/Guardian 1: _____

Signature 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: _____



SEPA Direct Debit Mandate



Unique Mandate Reference

Unique Mandate Reference (UMR) – to be completed by Tiger Time Ltd

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 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 &
	T E C H N O L O G Y P A R K
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 or One-off 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

