

Jubilee Jets

Paddock View, Rectory Road,
Padworth Common, Berkshire, RG7 4JD
0118 970 1600
www.jubileejets.co.uk

REGISTRATION FORM

Child's full name

Date of birth Male/Female.....

Parents Contact information:

Mothers Name:.....

Mobile..... Work Contact

Fathers Name:.....

Mobile..... Work Contact

Home address:

.....
.....

Postcode

Telephone: Home

e-mail contact

Emergency Contact Name (other than Parents)

Full Name

Relationship to Child

Contact Telephone

Mobile

Emergency Contact Address

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Has your child any allergies or special dietary needs? **Yes / No**

If YES please give details

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Does your child require any regular Medication? **Yes / No**

If YES please give details

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Name of your Doctor Tel number

Permissions;

- Do we have your permission for your child to receive Emergency Medical treatment?
Yes / No
- Do we have your permission for your child to be administered child Paracetamol if required?
Yes / No
- Do you give consent for your child to have photographs taken in the nursery setting?
Yes / No
- Do you give consent for your child to go on nursery trips and outings—duly supervised?
Yes / No
- I give permission for my child to take part in all activities within Jubilee Jets
Yes / No

Please provide any information you feel the nursery should know regarding your child.

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Signature of Parent/Guardian Date

Signature of Nursery manager Date