



REGISTRATION FORM.

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1. CHILDS DETAILS

Name: _____

Nickname of child (if any): _____ Date of Joining: _____

Gender: _____ Date of Birth: _____ Place of Birth: _____

Age: _____ Nationality: _____ Religion: _____

Languages spoken at home: 1. _____ 2. _____

Address: _____

2. FAMILY DETAILS

Father's Name: _____ Mother's Name: _____

Nationality: _____ Nationality: _____

Mobile Number: _____ Mobile Number: _____

Work Number: _____ Work Number: _____

Home Number: _____ Home Number: _____

Email Address: _____ Email Address: _____

3. EMERGENCY CONTACT DETAILS

1. Name: _____ Relationship to child: _____ Mobile Number: _____

2. Name: _____ Relationship to child: _____ Mobile Number: _____

3. Name: _____ Relationship to child: _____ Mobile Number: _____

3.1 PERSONS AUTHORISED TO COLLECT MY CHILD

1. _____

2. _____

3. _____

4. _____

Your child will only be allowed to leave the nursery with the above mentioned people.
Should you need any other person to collect your child, you must first authorize this at reception.



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4. ATTENDANCE BOOKING

Please choose your preferred days and times from the options below.

Nursery timings will be from 7:00am to 4:00pm. Our core hours are from 8:00am to 2:00pm.

Late pick up fees will be charged from 2:15pm onwards.

We have flexible options to meet the requirements and needs of our families, for further information or any assistance/queries regarding the days and times contact the Administration office.

Number of days attending: 3 days 4 days 5 days

Attendance Days: Monday Tuesday Wednesday Thursday Friday

Hours: Core Hours 8:00am - 2:00pm Early Bird Care 7:00am - 2:00pm Afternoon Care 8:00am - 3:00pm Afternoon Care 8:00am - 4:00pm Extended Hours 7:00am - 4:00pm

5. MEDICAL QUESTIONNAIRE

Has your child had any of the following illnesses or suffer from any of these conditions?

- | | | | | | |
|--------------------------|------------------------------|-----------------------------|--------------------------|------------------------------|-----------------------------|
| Regular Medication | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Vision Impairments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Hearing Difficulties | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Respiratory Difficulties | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Skin Conditions | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Frequent Colds/Sinusitis | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Chicken Pox | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Vision Impairments | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Whooping Cough | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Fainting | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| German Measles (Rubella) | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Asthma | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Epilepsy | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Mumps | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Diabetes | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Rheumatic Fever | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Heart Trouble | <input type="checkbox"/> Yes | <input type="checkbox"/> No | Tonsillitis | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Operations (Specify) _____

Serious Injuries (Specify) _____

In order to meet the developmental needs of all children, class placement is very important. Please answer the following questions, bearing in mind that your answer will not impact your child's place at Treehouse Nursery.

Special educational needs, disabilities, or concerns:

- Yes (please specify) _____
- No

Previously or Currently receiving specialized therapies (speech, occupational) or learning support:

- Yes (please specify) _____
- No



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5.1 Allergies

Allergic to medication: Yes / No

Please specify _____

Reaction _____

Other Allergies: Yes / No

Please specify _____

Reaction _____

Allergic to food: Yes / No

Please specify _____

Reaction _____

6. MEDICINE ADMINISTRATION

If your child is unwell they should not attend nursery. The daily nursery program is very active and requires that the child is in good health to be able to benefit and enjoy a positive experience. If your child has a fever or needs to rest, we ask you to please keep your child at home.

In the event that a child gets sick during the time at the nursery, we require your consent to administer the following medication.

Paracetamol – In case of a fever above 38 degrees Celsius Yes No

Anti histamine – In the case of an allergic reaction Yes No

Arnica Gel – In the case of bumps, bruises and bites Yes No

7. PHOTOGRAPH AGREEMENT

Please tick below if you give consent for your child to be photographed at the nursery. The photos will be used internally, in newsletters, yearbooks and bulletin boards as well as on our Website, Facebook and Instagram.

Yes, I agree that my child is photographed No, I do not agree that my child is photographed

REGISTRATION CHECKLIST

Completed registration form	<input type="checkbox"/>	Registration fee	<input type="checkbox"/>
Copy of child's birth certificate	<input type="checkbox"/>	Term fees	<input type="checkbox"/>
Copy of child's Emirates ID	<input type="checkbox"/>	Copy of child's medical insurance card	<input type="checkbox"/>
Recent passport sized photograph of child	<input type="checkbox"/>		



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TERMS AND CONDITIONS

Please read and sign agreement of the Terms and Conditions below, which are applicable to your child's enrolment at Treehouse Nursery.

Age of Admission

We accept children from one year to four years of age, at the start of the academic year.

Nursery Timing

Treehouse Nursery is open from Monday to Friday from 7:00am to 4:00pm. Our core hours are from 8:00am to 2:00pm

Registration Fees

Registration fees are payable upon registration and apply to enrolment of the specific child. The registration fees are non-refundable and non-transferable.

Tuition fees

Tuition fees are to be settled in full before the start of the new term, or by the first week of the term at the latest. If starting in the running term tuition fees will be due in full upon registration. The nursery will not be able to offer 'make up days' due to illness, public or family holidays. During the Holy Month of Ramadan, we are not able to discount any missed weeks.

Late pick up Fee

The amount of dhs 25 per hour will be charged if child is picked up later than 2:15pm.

Arrivals and Departure of Children

Treehouse Nursery is committed to ensure the safety and welfare of all our children, therefore please ensure upon arrival your child is handed over to his/her teacher. Also children must be collected by the named person/persons on the registration form. If you are unable to collect your child please contact the nursery so we can ensure the appropriate care is provided for your child.

Withdrawal Notification

If you wish to withdraw your child from the nursery, we request three months / one term's written notice. Once your child is enrolled, it is assumed that they will continue until the end of the current academic year, unless informed otherwise in writing.

Termination

At Treehouse Nursery, full support will be given to encourage positive behaviour with the cooperation of parents as our partners. However, in the case that a child continues to display anti-social behaviour, such as hitting or biting, measures to protect the wellbeing of the other children in the nursery will have to be taken. This will be a last resort in the unlikely event that after all the necessary support the child's behaviour remains the same.

Illness

Children who are sick are requested to stay at home until their health improves. Treehouse Nursery will not allow children to enter the nursery until they are symptom free. If your child develops a fever, rash, diarrhea, vomiting, conjunctivitis, head lice or other contagious conditions, you are requested to keep the child at home until it clears, according to our Nursery policy handbook.

I have understood and accept the above terms and conditions.

Child's Name: _____

Parents Name: _____

Signature: _____

Date: _____