



**Please find enclosed:**

Welcome Letter From Committee

Registration Form

‘All about Me’ - Personal Information Form

Parent Helpers List

Terms and Conditions

**The Cabin Pre-School CIO**

Reading Road, Woodcote, RG8 0QY

Charity Registration Number 1164579 Telephone Number 01491 680854



THE CABIN PRE-SCHOOL CIO  
READING ROAD  
WOODCOTE  
RG8 0QY  
  
01491 680854  
info@thecabinpreschool.co.uk

## Welcome letter from the Committee

We would like to take this opportunity to wish you a warm welcome to The Cabin Pre-School.

As a new parent you are perhaps a bit bewildered by all the various fundraising events, or may view them as just a routine part of Pre-School life. We would like to explain why fundraising is so very necessary for The Cabin.

The Pre-School is run as a charity and therefore has always relied on the full support of all parents for its continued survival. The funds we receive each term cover the costs of staffing but not all other requirements of running The Cabin, such as electricity bills, building repairs etc. There is also the need to keep all toys and educational material updated.

The Cabin is run by a volunteer Committee made up of Cabin parents past and present. The Committee needs your help with fundraising and with the running the Cabin. If you could help out, even just once a year it would make a huge difference and help reduce costs. Helping allows you to get really involved in the child's early education.

If you would be interested in joining the committee please speak to any member of staff, someone on the committee, or complete the attached form. We are always looking for new members and fresh ideas for fundraising events.

We look forward to your support and hope that your child's time at Cabin is a happy one for you and your child.

The Cabin Committee

## My Details

Child's Full Name \_\_\_\_\_

Name known as (name child learns to write) \_\_\_\_\_

Date of birth \_\_\_\_\_ Gender \_\_\_\_\_

Child's first language \_\_\_\_\_ Child's Religion \_\_\_\_\_

Name(s) of Parent(s)/Carer(s) with whom the child normally lives \_\_\_\_\_

## Parents/Carers Information

1. Parent/Carer full name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Home Phone \_\_\_\_\_

Work number \_\_\_\_\_ Mobile number \_\_\_\_\_

Email address \_\_\_\_\_

Home Address \_\_\_\_\_

Work Address \_\_\_\_\_

Does this parent have parental responsibility for the child Yes / No

2. Parent/Carer full name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Home Phone \_\_\_\_\_

Work number \_\_\_\_\_ Mobile number \_\_\_\_\_

Email address \_\_\_\_\_

Home Address \_\_\_\_\_

Work Address \_\_\_\_\_

Does this parent have parental responsibility for the child Yes / No

3. Other person (s) with legal contact To be completed where those person with parental responsibility are separated and an S8 Order is in place.

Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Numbers \_\_\_\_\_

Relationship to child \_\_\_\_\_

What are the contact arrangements that we need to be aware of? \_\_\_\_\_

**Emergency Contacts** if parents are not available. Emergency contacts must be local

Contact 1 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Day Time number \_\_\_\_\_ Mobile \_\_\_\_\_

Contact 2 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Number \_\_\_\_\_ Mobile \_\_\_\_\_

In the event that no one can be contacted in an emergency the Nursery Manager will allow other trained professionals to make decisions in the best interest of your child (e.g. medical staff)

**Persons other than parent(s) Authorised to collect the child** Must be over 16 years of age. Please note that if the authorised person is not indicated on the daily signing in/out sheet or knows the password, staff will check before releasing the child.

Contact 1 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Day Time number \_\_\_\_\_ Mobile \_\_\_\_\_

Contact 2 Name \_\_\_\_\_ Relationship \_\_\_\_\_

Daytime Number \_\_\_\_\_ Mobile \_\_\_\_\_

Password for the collection of child by authorised persons \_\_\_\_\_

**Professionals involved with your child**

GP

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Health Visitor (if applicable)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Social Care Worker (if applicable)

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

What is the reason for the involvement of the social care department with your family? NB if the child has a child protection plan, make a note here, but do not include details. We will ensure these details are obtained from the social care worker named above and keep securely in the child's file.

## About your child

Does your child have previous experience of attending a childcare setting? Yes / No

If so, name and address of the provision \_\_\_\_\_

Can we contact them? Yes / No

Has your child received the following immunisations? Please confirm and provide dates.

Two Months Old    5-in-1 (DTaP/IPV/Hib) vaccine - diphtheria, tetanus, pertussis (whooping cough), Polio and Haemophilus influenza type b (Hib)    Yes / No    Date:

Pneumococcal (PCV) vaccine.    Yes / No    Date:

Rotavirus Vaccine    Yes / No    Date:

Three months old    5-in-1 (DTaP/IPV/Hib) vaccine, second dose - diphtheria, tetanus, pertussis (whooping cough), Polio and Haemophilus influenza type b (Hib)    Yes / No    Date:

Meningitis C vaccine    Yes / No    Date:

Rotavirus, second dose    Yes / No    Date:

Four months old    5-in-1 (DTaP/IPV/Hib) vaccine, third dose - diphtheria, tetanus, pertussis (whooping cough), Polio and Haemophilus influenza type b (Hib)    Yes / No    Date:

Pneumococcal (PCV) vaccine, second dose.    Yes / No    Date:

Between 12 and 13 months old    Hib/Men C Booster - Haemophilus influenza type b (Hib), fortyh dose and Meningitis C, second dose.    Yes / No    Date:

MMR Vaccine - mumps, measles and rubella.    Yes / No    Date:

Pneumococcal (PCV) vaccine, third dose.    Yes / No    Date:

Two to three years    Flu Vaccine    Yes / No    Date:

Three years & four months or soon after    MMR Vaccine, second dose - mumps, measles and rubella.    Yes / No    Date:

4-in-1 (Dtap/IPV) pre-school booster - diphtheria, tetanus, pertussis (whooping cough), and Polio    Yes / No    Date:

*For internal use: has the child's health record book been seen to confirm dates? Y / N*

Does your child have any on-going medical conditions? If so, please specify: \_\_\_\_\_

If yes, please specify which external agencies are involved e.g. Paediatrician, Dietician, Speech and Language Therapist, etc: \_\_\_\_\_

Does your child require a health care plan? Yes / No

Is your child known to have any allergies or food intolerances? \_\_\_\_\_

*A risk assessment will be completed and kept on the child's file for any known allergies or food intolerance as mentioned above.*

What are your child's dietary requirements? \_\_\_\_\_

Does your child have any other special needs and / or require any additional support?

Are any of the following in place for the child

SEN action plan Yes / No

Education, health and Care Plan Yes / No

What special support will he/she require in our setting? \_\_\_\_\_

### Two Year old checks

If your child is aged between 24-36 months, has a two year old progress check been completed for your child? Yes / No

Setting completing check \_\_\_\_\_ Date \_\_\_\_\_

As per the requirements of the Early Years Foundation Stage we will complete a progress check on your child between the ages of 24-36 months. We will ask you to be involved in completing the check and will discuss it with you.

If your child is aged three years or over, does he or she have difficulty with any of the following:

- |  |          |
|--|----------|
| Speaking and communicating                 | Yes / No |
| Listening and attention                    | Yes / No |
| Understanding simple instructions          | Yes / No |
| Eating and Drinking                        | Yes / No |
| Sitting and Sharing a book                 | Yes / No |
| Walking and climbing                       | Yes / No |
| Rolling a ball                             | Yes / No |
| Holding a crayon                           | Yes / No |
| Socialising with adults and other children | Yes / No |
| Using the toilet                           | Yes / No |
| Putting on their shoes and socks           | Yes / No |

Any other concerns: \_\_\_\_\_

### **Cultural Background**

How would you describe your child's ethnicity or cultural background? \_\_\_\_\_

What is the main religion in your family? (if applicable) \_\_\_\_\_

Are there any festivals or special occasions celebrated in your culture that your child will be taking part in and that you would like to see acknowledged and celebrated while he/she is at The Cabin Pre-School.? \_\_\_\_\_

What language(s) is/are spoken at home? \_\_\_\_\_

If English is not the main language spoken at home, will this be your child's first experience of an English speaking environment? Yes / No

Does your child need a bilingual support plan? Yes / No

If so, discuss and agree with the key person how we can work together to support your child when settling in.

### **Key Person - Information for parents.**

Each child joining the setting will have a key person appointed to them. It will be the key person's responsibility to ensure that your child receives the best possible attention whilst in our care and to ensure that their records are kept up-to date. The key person may change as your child progresses through the setting. You will be notified of these changes. Your child's key person will be allocated within the first weeks at Cabin. You will be notified ASAP. They are your first point of contact for anything you wish to discuss about your child

## Permissions

Childs Name \_\_\_\_\_

### Emergency Treatment declaration

In the event of an accident or emergency involving my child I understand that every effort will be made to contact me immediately. Emergency services will be called as necessary and I understand my child may be taken to hospital accompanied by the Manager (or authorised deputy) for emergency treatment and that health professionals are responsible for any decisions on medical treatment in my absence.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

### For Inhalers/Auto-injectors (e.g. Epipens) only

I give permission for a an appropriately trained member of staff to administer the inhaler/auto-injector supplied by me.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

### Paracetamol based medicine (e.g Calpol)

I give permission for staff to administer paracetamol based products e.g. Calpol in the case of a raised temperature and on the understanding that I will be making arrangements for my child to be collected as soon as possible in accordance with the setting's procedures on the administration of medicines.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

### Suncream

I give permission for staff to be administer hypoallergenic suncream (supplied by me) when necessary and to record its use.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

### Short Trips - General outings

Your child will be taken out of our setting as part of the daily activities. The venues used are: Post office, Library, Garden Centre, Walks around the Rec.

I Give permission for \_\_\_\_\_ (name of child) to take part in short trips or general outings. I understand that individual risk assessments are carried out for each type of trip or outing taken and are available for me to see as required. For any major outings, I understand I will be informed and my specific consent obtained.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_



## Photographs and art work

As part of the on-going recording of our curriculum and for children's individual development records, staff regularly take photographs of the children during their play. Only cameras supplied by the setting are used for this purpose, photographs taken are used for display and for your child's records within the setting. We may also record events and activities on video. Photos/videos are stored on the setting's computer only; we only store images during the period your child is with us.

I give permission for child's photo to be taken during activities  
and displayed in the nursery Yes / No

I give permission for child's photo to be used in press articles Yes / No

I give permission child's name to be used in press articles Yes / No

I give permission for my child's photograph to appear on our website Yes / No

I give permission for my child's work to appear on our website and  
facebook page Yes / No

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Observations - Do you give permission for other professionals such as S.E.N.I.T, Health visitors, or safeguarding individuals to carry out and record observations on your child for the purpose of developmental assessment Yes / No

Animals - We currently have Guinea Pigs in our premises. We will also occasionally have supervised visits of animals to our setting.

We will ensure that our pets are healthy and fully inoculated, as appropriate, and that animals showing signs of disease are treated. A risk assessment will be carried out for visiting animals, and parents informed.

Please state below any known allergies or aversions your child has to animals \_\_\_\_\_

\_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Nappy Cream - I give permission for nappy cream (supplied by me) to be administered when required, in accordance with manufacturer's instructions.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Teeth Cleaning - I give permission for staff to clean my child's teeth (toothbrush supplied by me) after lunch.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

## Session Details

Please tick your preferred sessions

Day/Session	8.30 - 9.00am (Early Start)	9.00 - 11.30am (Morning)	11.30 - 12.30pm (Lunch)	12.30 - 3.00pm (Afternoon)	3.00 - 3.30pm (Late Stay)
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					

Preferred Start Date:

## Policies and procedures

I have been provided with details of The Cabin Pre-School's policies and procedures. The policies and procedures have been explained to me, including the Information Sharing Policy, and I understand that there may be circumstances where information is shared with other professionals or agencies without my consent.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Please sign below to indicate that the information given on this form is accurate and correct, and that you will notify us of any changes as they arise

Name of Parent/Carer \_\_\_\_\_

Signature \_\_\_\_\_ Date:     /     /

Please return completed forms, and £30 deposit to: The Cabin Pre-School, Reading Road, Woodcote, RG8 0QY. [www.thecabinpreschool.co.uk](http://www.thecabinpreschool.co.uk)

Donated deposits will receive a Cabin book bag & Polo shirt.

Charity Registration Number 1164579. Telephone number 01491 680854. <sup>10</sup>

**'All About Me'**

Child Personal Information

My Name	
Date of Birth	
Names and ages of any brothers and sisters	
Pets if any and their names	
Does your child have a special toy or object they might bring with them?	
Does your child have any special words?	
Does your child have any particular fears?	
Details of any other group you attend e.g. swimming, playgroup or music group.	
Does your child have any food preferences/dislikes?	
Does your child have a pacifier i.e dummy, thumb, comfort blanket?	
What sort of things does your child enjoy doing at home i.e. drawing or cooking.	
Is your child able to go to the toilet independently?	YES / NO
Anything else you would like us to know about your child	



## Parental Helpers List

As you may be aware we are managed by a volunteer Committee which are mainly made up of parents whom have children at The Cabin. The Committee need support from parents to help raise funds to keep cabin fees low and provide excellent all round education. If you could tick any of the attached boxes below agreeing to help where possible, we can contact you when necessary.

<b>Name</b>	
<b>Contact Number</b>	
<b>Contact Email</b>	
Being on the committee (you will need to be DBS checked)	
Parent Helper (you will need to be DBS checked)	
Help organise events, such as coffee shop.	
Help work on fundraising events	
Research new projects ie. Gain quotes for new equipment.	
Cleaning and mending toys	
Baking Cakes	
General maintenance, small jobs.	
Internet Updates	
Proof Reading	
Photography	
Other:	

## Session Times & Fees

	Morning Session	Lunch Session	Afternoon Session
Monday	9.00am - 11.30am	11.30am - 12.30pm	12.30pm - 3.00pm
Tuesday	9.00am - 11.30am	11.30am - 12.30pm	12.30pm - 3.00pm
Wednesday	9.00am - 11.30am	11.30am - 12.30pm	12.30pm - 3.00pm
Thursday	9.00am - 11.30am	11.30am - 12.30pm	12.30pm - 3.00pm
Friday	9.00am - 11.30am	11.30am - 12.30pm	12.30pm - 3.00pm

Term dates are displayed on the notice board inside The Cabin and are detailed in the Manager's termly newsletter.

We also offer Early starts 8.30am - 9am and Late Stay 3.00pm - 3.30pm

Fees are invoiced on a termly basis and should be paid within fourteen days of term starting. Payment can be made by Bank Transfers (bank details are on the invoice), cash or cheque. Cheques should be made payable to 'The Cabin Pre-School'. We also accept childcare vouchers as payment from a number of schemes.

Reminder e-mails for payments will be issued. Invoices overdue will incur an additional charge of £5 per week until the invoice is settled. Please speak with the Manager/Administrator if you wish to make payment arrangements. We reserve the right to withdraw Non-Government funded sessions if no agreement has been agreed to rectify the situation.

If your child is ill or absent from the Pre-School including for holidays no refund can be made. We may be able to sell some sessions if we have advanced notice of holidays etc. We will encourage extra bought sessions to be paid directly to the persons selling them. We are unable to sell government grant sessions.

## Notice of Leaving / Changing Sessions

Once you have signed to accept these Terms and Conditions, one term's written notice is required to change or cancel sessions and you will be liable for the term's fees should you remove your child mid term or not use your allotted sessions.

## Lunchtimes

Hot lunches are provided by the catering department at the local Secondary School for children to eat at the cabin. They should be ordered directly on their website. The cost of hot meals are £2.20 (subject to change). Weekly menus are on display in cabin and on our website.

Alternatively you should provide lunch in a named lunchbox. Special dietary needs should be notified to the Cabin in writing. Any foods which you would like to be refrigerated please give to a member of staff each morning, ensuring it is labelled. We are unable to reheat food.

We must insist that **NO Nuts**, peanut butter, Nutella or cakes/biscuits containing nuts are sent in any lunchbox. We are all aware of the severity and consequences of a child who is allergic to nuts accidentally or mistakenly eating them and we would therefore appreciate your co-operation with this request.

## **Drop Off and Collection**

At the start and end of the session you are required to complete the signing in and out sheet, leaving any comments particularly if there is a change to who will be collecting your child.

### **Morning Drop off**

Door will be opened at 0850, please leave the children by 0900 hrs each morning.

You should access and exit via the main entrance to the primary school, whose gate opens at 8.40 am

All other drop off and collections times.

Please come to the side gate, which is accessed through Langtree School car park, where your key worker (when possible) will escort your child on and off site.

In case of emergency The Cabin's telephone number is **01491 680854**

## **Leaving your Child**

We would ask parents/carers to co-operate with the wishes of the Manager when leaving their child. As they are so young it may take them a while to settle with us. Parents maybe requested to go, stay or come back within a short time span, whichever is appropriate. Our best interests are for each child to make the break with home as confidently and happily as possible. The only exception to this is when coming for introductory visits, when a parent /carer must remain with the child. When dropping and collecting your child please sign the sign in/out sheet.

Your child can only be collected by people named by you. If you arrange for someone else to collect your child, please ensure that you inform a member of staff and that this is recorded in the daily diary.

Please wait outside and we will bring your child out at the end of the session.

## **Safeguarding Responsibilities**

We have a duty to report concerns regarding the welfare of the children attending cabin to: Oxfordshire safeguarding child assessment team 01865897983 and Ofsted 03001231231

The Cabin Pre-school is owned and run by a Committee made up of volunteers, in our own building with a lease from Oxfordshire Council for the use of the land on which we operate.

## **Accidents**

In the event of a serious accident, staff will attempt to telephone parents or the emergency contacts as provided. The child's own doctor would also be contacted. Should a child need to receive emergency treatment away from the pre-school, a member of staff would accompany the child to either a surgery or hospital until a parent/carer arrived. All major and minor accidents are recorded in the 'Accident Book' located within the pre-school.

Please be aware that we need to keep a record of all accidents and if you are approached by a member of staff to complete our accident records we would appreciate your co-operation.

## **Medicines**

The Cabin must be advised of all medication that your child may take on a regular basis. We are unable to give any medicines unless they have been prescribed by a doctor and we have written consent - this means that we are unable to administer medicines such as Calpol unless a doctor's prescription label is on the bottle.

## **Clothing**

There is no compulsory uniform; however, Cabin Sweatshirts and T-Shirts are available to purchase. We would suggest that your child wears old comfortable clothing. Avoid jeans with buttons and a zip, dungarees and any clothing that will prevent your child from using the toilet independently. Aprons will be provided for messy play and whilst washable products are used (pens & paints) there is no guarantee staining will not result from spills.

Please provide an indoor pair of shoes or slippers to change into on arrival.

In the summer, please send your child with a sun hat and sun cream marked with his/her name, and during the winter with a warm hat and gloves.

## **Discipline**

We aim to deal with children in a positive manner at all times. Children are encouraged to be kind and caring towards each other and adults. Should problems arise, we would want to be firm but fair. Adults will not shout or raise their voice in a threatening way. No child will be physically chastised or punished. In extreme cases of consistent bad behaviour or disruption, this will be discussed with the parent(s)/guardian(s) of the child and may result in a child being asked to leave the pre-school as we have to act in the best interest of the whole group.

## **Illness**

We will refuse to accept children at a session who present symptoms for any contagious illnesses/sickness and diarrhoea. Please keep your child away from pre-school for a further 48 hours after recovery. This is to prevent it spreading to other children and staff.

## **The Role of Parents / Guardians**

The Cabin Pre-School is run by committee, under a constitution set out by The Pre-School Learning Alliance (PLA). The PLA recognises parents as the first and most important educators of young children. Our Pre-School aims to support parents. When you enrol at Cabin you automatically become a member of the PLA (our insurance company). It is a requirement that you **must** send a representative for your child to every AGM TO ENABLE THE COMMITTEE TO BE VOTED IN. Without the Committee the Cabin Pre-school can not operate. Parents are welcome to join our Committee which manages the Pre-school. By joining the Committee you can assist with Decision Making, Fundraising, and attend meetings and courses run by the PLA.

## **Changes to Family Circumstances**

Changes in your family environment, however subtle, can have a very unsettling effect on your child. Please help us to understand any changes in their behaviour by advising us of any recent or imminent events that may be on your child's mind (e.g. new baby or moving house).

## **Child Observations**

We occasionally have staff and/or students at Pre-School completing course work. If you do not wish your child to be included, please let the manager know and your wish will be respected.