



Office Use Only	
Childs Name	
Ref Number	
Password	



SUNSHINE GUARDERIA INFANTIL

TEL : +34 865 752 763

APPLICATION FOR REGISTRATION

(Please use BLOCK CAPITALS)

Father/Guardian 1	Surnames:	Forenames:	Title: Mr/Mrs/Miss/Ms/Other
Mother/Guardian 2	Surnames:	Forenames:	Title: Mr/Mrs/Miss/Ms/Other

Home Address	Av/Street/Road		Number
	Localisation	Town	
	Region	Country	Postal Code

Fathers Phone no:			
Fathers e-mail:			
Mothers Phone no:			
Mothers e-mail			

FATHERS EMPLOYMENT DETAILS

Employers Name			
Employers Address			
Occupation		Job Title:	

**MOTHERS EMPLOYMENT DETAILS**

Employers Name		
Employers Address		
Occupation		Job Title:

Please provide the name(s) of whom the child lives with	
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CHILDS DETAILS

Childs First Name(s)	Childs Middle Name(s)	Childs Surname(s)
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Gender (circle) M F Unknown	Childs Date of Birth	Age at application Date (Months)

First Language Spoken		SIP Number	
Second Language Spoken		Passport Number	
Type of Photographic ID Enclosed (Birth Certificate is acceptable also)			

Place of birth	
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DOCTORS DETAILS

Doctors		Surgery Telephone No:	
Doctors Surgery Address			



CHILD HEALTH DETAILS

Please advise below immunisations received by your child			
Description	Tick	Date Immunised	Where Immunised
DTaP/IPV/Hib, PCV, MenB, Rota-8 weeks			
DTaP/IPV/Hib and Rota-12 weeks			
DTaP/IPV/Hib, PCV, MenB-16 weeks			
Hib/Men C, PCV, MenB, MMR (1 st dose) – 12 to 13 months			
DtaP/IPV or dTap/IPV and MMR (2 nd dose)			
IMPORTANT : Please keep Sunshine up to date with your child’s immunisation program			

MEDICAL DETAILS

Please detail any medical conditions about your child that we should know about	
Is your child on any regular medicine	Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, please give details:	

ALLERGIES

Please detail any allergies that your child suffers from:



DIET REQUIREMENTS

Please detail any special dietary requirements that your child has

Please tick the appropriate boxes if your child is NOT allowed the following

<u>Meats</u>	<u>Dairy</u>	<u>Other</u>	<u>Drinks</u>
White Meat <input type="checkbox"/>	Eggs <input type="checkbox"/>	Biscuits <input type="checkbox"/>	Blackcurrant <input type="checkbox"/>
Red Meat <input type="checkbox"/>	Cheese <input type="checkbox"/>	Sugar <input type="checkbox"/>	Orange Squash <input type="checkbox"/>
Beef <input type="checkbox"/>	Butter <input type="checkbox"/>	Salt <input type="checkbox"/>	Orange Juice <input type="checkbox"/>
Pork <input type="checkbox"/>	Margarine <input type="checkbox"/>	<input type="checkbox"/>	Cold Milk <input type="checkbox"/>
Poultry <input type="checkbox"/>	Milk <input type="checkbox"/>	<input type="checkbox"/>	Warm Milk <input type="checkbox"/>
Game <input type="checkbox"/>	Fish <input type="checkbox"/>	<input type="checkbox"/>	Filtered Tap Water <input type="checkbox"/>
		<input type="checkbox"/>	Bottled Mineral Water <input type="checkbox"/>

BABY MILK DETAILS

If your child is feeding on baby milk, please detail below

Brand and Type:

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Amount to be given:

Times/Frequency of feeds:

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ATTENDANCE DETAILS

Please indicate required attendance times :

	Early Drop off (include time)	Morning (0900-1300)	Morning+ (0900-1330)	¼ Day (0900-1530)	Full Day (0900-1700)	Late Pick up (include time)
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



What date do you want your child to start	□□ DD	□□ MM	□□ YY
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Please provide details of any other persons other than yourselves whom are authorised to collect your child or children and also set a password even if no one else will be collecting them

Security : Under no circumstances will your child be allowed to leave Sunshine with anyone unknown to Sunshine staff unless previously arranged by you the parent / guardian. If parents arrange collection of their child by telephone a name and password will be required

PHOTOGRAPHIC IDS WILL ALSO BE REQUIRED FOR AUTHORISED PERSONS

Name:			Tel
Address:			
PASSWORD (MUST SET)			
Photographic ID Type / Number			

Name:			Tel
Address:			
PASSWORD (MUST SET)			
Photographic ID Type / Number			

ILLNESS POLICY

In the event of sickness every effort will be made to contact Parent / Guardian. Only in minor cases of sickness should a child be kept at Sunshine otherwise parent or responsible person will be informed to collect the child(ren)

MEDICINE POLICY

This will be administered to your child on your instructions and a form will be required to be signed by you. Medication will only be administered to your child if your doctor has prescribed it and it should be clearly labelled in original container.

We will administer Paracetamol if you request it, at a nominal charge of €1 per administration. We will not administer Paracetamol until your child has been at Sunshine for at least FOUR hours each day and we will usually only give for 2 consecutive days.

INCIDENT POLICY

Parents will be informed of all incidents, which are recorded in the incident log, and will be required to sign a child incident log.

Sunshine reserves the right to administer first aid and in an emergency to call an ambulance and take the child to hospital to seek medical treatment.

CHILD PROTECTION POLICY

It is important to be aware that if any child at Sunshine is believed to be at risk or harm further action will be taken.



MANAGING CHILDRENS BEHAVIOUR POLICY

At Sunshine we discourage bad behaviour and encourage good behaviour.

We have various strategies to manage behaviour.

If a child is misbehaving we would explain to the child why their behaviour is wrong and remove them from the situation and find them an activity to keep them occupied and engaged.

Praise and encouragement would be given throughout this period.

Physical punishment would never be administered; we would always use positive methods.

SUNCREAM POLICY

Sun cream will be applied when children go outside to play. Sunshine will provide the factor 50+ sun cream

The cost to the parent / guardian is €10 charged on registration, billed separately and then every March thereafter. This should cover for two bottles of Sun cream for the year.

EQUALITY AND DIVERSITY

We are committed to providing equality of opportunity and anti-discriminatory practice for all children and families.

OUTDOORS

By ensuring outdoor play is an integral part of the Sunshine routine we seek to enrich the children’s understanding of the world around them.

DOMESTIC PETS

We have friendly domestic pets in our residential premises above Sunshine. Is there any reason that you or your child wishes not to have any contact with our animals?

PLEASE PROVIDE THE FOLLOWING ITEMS :

- Milk if appropriate.
- Nappies
- Toothbrush
- Wipes
- Nappy Cream
- Comforter
- Spare change of clothes appropriate for weather
- Extra knickers or pants if potty training
- Sun Hat
- Plastic Water Cup
- Coat in cooler months
- Warm Hat and gloves in cooler weather
- Healthy packed lunch if your child is staying for lunch

ALL ITEMS SHOULD BE CLEARLY LABELLED WITH CHILDS NAME

If Sunshine nappies or wipes are used, you will be charged for this.

Please do not bring toys to Sunshine we do not want them to get lost or damaged



FEES

An administration charge of €50.00, non-refundable is required with each completed Pre Registration form. On presentation of the Full Registration form, a €150 deposit for each attending child is required. This deposit is deducted from your final bill as long as the standard **four** weeks notice has been given. Any remaining deposit will be refunded via bank transfer if applicable.

We invoice for future attendance fees on the 20th of each month, pro rata if needed. This invoice will need to be paid in full on or before the 1st of the Month following the invoice date. If the invoice is not paid by the due date, we will refuse attendance until the invoice is paid in full and or start deducting one months worth of your normal attendance fees from your deposit. If the invoice remains unpaid 5 working days from the 1st of the month, we will unfortunately terminate your child's attendance permanently, deduct one months normal attendance fees and add any administration charges before refunding any remaining deposit via bank transfer.

Non-payments may result in a charge of €25.00 to cover administration costs. In the event of an unpaid cheque DD a charge of €25.00 will be made to cover bank charges and payment reminder letter. Fees are reviewed annually and are non-refundable in the event of non-attendance. **Sunshine** reserves the right to refuse admission to clients not adhering to our terms and conditions. Sunshine is closed on National Red Days and during the Christmas period (dates of opening and closing times will be advised) however, fees are payable in full for National Red Days but no charge shall be made for the other days closed over Christmas + part of August (2021 onwards – to be advised)

TERMINATION / CANCELLATION CHARGE

One months notice is required for termination of placement, also one months notice for charges to your child's attendance. Sunshine may request withdrawal of your child at any time . Sunshine will require full payment whether your child attends or not during the termination. All charges due to be paid whilst the termination period is in force will be deducted from your €150 deposit, with the remaining balance if any to be refunded via bank transfer.

LATE CHARGES

Sunshine opening times are 0900 to 1700 Monday to Friday. Charges are for attendance between these times as per our schedule of prices. Late collection outside of your normal charges attendance WILL be charged as per our late charges prices.

NON ATTENDANCE - SUNSHINE

Non attendance requires notification of non-attendance within the first hour of opening. In the event of a child being diagnosed with a contagious disease Sunshine should be notified immediately. In the event of sickness your child should be clear 48 hrs before re-attendance



SETTLING IN FORM

Dear client, could you please answer all these questions in as much detail as possible. This will help us get to know your child and help him/her settle in quickly

CHILDS NAME:	DATE:
1. Are there any milk feeds to be given to your child during the day, is so what times	AM: PM:
2. What type of milk does your child drink?	
3. What are your child's favourite foods?	
4. What foods does your child dislike?	
5. Does your child have any daytime sleep? If so, what time?	
6. How does your child go to sleep?	
7. Does your child have a comforter?	
8. What are your child's favourite songs and games?	



PHOTOGRAPHIC / MEDIA CONSENT FORM	
CHILDS NAME:	DATE:
Do you give permission for Sunshine to take photos for or with.	
For Sunshine Nursery Display Work	Yes <input type="checkbox"/> No <input type="checkbox"/>
For Childs Personal Work	Yes <input type="checkbox"/> No <input type="checkbox"/>
For Website Gallery Photos	Yes <input type="checkbox"/> No <input type="checkbox"/>
By Sunshine Staff authorised devices for communication to parents / guardians via WhatsApp (images to be deleted once communicated) for updates	Yes <input type="checkbox"/> No <input type="checkbox"/>
For Local Papers / Magazines	Yes <input type="checkbox"/> No <input type="checkbox"/>
For Sunshine authorised Social Media	Yes <input type="checkbox"/> No <input type="checkbox"/>

AGREEMENT TO CONDITIONS

I wish to apply for admission for the above named child to Sunshine Guarderia Infantil and agree to comply with any polices / terms and conditions imposed by Sunshine and any other conditions which may be required in the future		
Signed: Parent / Guardian 1		Date:
Signed: Parent / Guardian 2		Date:

For office use only

Date Application received	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	By:	
	DD MM YY		
Date entered onto computer	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	By:	
	DD MM YY		
Actual start date	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Expected leaving date:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
	DD MM YY		DD MM YY

