



Golden Glitters Child-Centered Nursery
Nursery Application Form
For Admission in September 2025/2026

Please use **BLOCK CAPITALS** to complete this form

DATE: D D / M M / Y Y

PART A			PARENTS/CARERS DETAILS	
	Main carer who lives with the child/ren (PARENT /GUARDIAN)	Second carer (PARENT/GUARDIAN)		
First Name				
Last Name				
Address Please provide two documents dated in the last 3 months showing proof of address.				
Postcode				
Date of Birth				
Telephone (H)				
Mobile				
E-mail (PLEASE WRITE IN BLOCK CAPITALS)				
Relationship to child/ren (e.g. Mother, Father, etc)				
Please tick if you have parental responsibility (on birth certificate)	Yes No	Yes No		
NI Number (PLEASE PROVIDE THIS INFORMATION)				
Is English your main language? What is your main language?	Yes No	Yes No		
Are you a lone Parent?	Yes No			
Do you work?	Yes No	Yes No		
Ethnicity (see codes attached)				
Emergency Contact	Name	Tel no.		
Relationship to you				
PART B	DETAILS OF CHILD Please complete a separate application form for each child who is applying for a place			
First Name				
Last Name				
Date of Birth: Please provide a copy of the birth certificate.				
Gender (M/F)	Male Female			
Ethnicity (see codes attached)				
Do you consider this child to have a disability or Special Educational Needs?*	Yes No Please describe:			

*If your child has an Educational Health Care Plan (EHCP) please include a copy with this application

If your family are eligible for free education and childcare hours, please put your code below. We have a number of places for children who are eligible for 30 hours and a number of places for families who wish to pay for their child's education and care. Please see our admissions policy for more information.

Cat.	Age Range + room	Type of Place	Please tick option																		
A	9 months to 3 year olds (Under 3's Room). For Sep 2025	4 or 5 day Fee Paying Place (inc. Free 30 hours if eligible) for from 8:00–3.30 (term time only contract – Monday - Thursday or Tuesday-Friday) <table border="1"> <thead> <tr> <th>Day</th><th>Please tick</th></tr> </thead> <tbody> <tr> <td>Monday-Thursday</td><td></td></tr> <tr> <td>Tuesday- Friday</td><td></td></tr> <tr> <td>Monday- Friday</td><td></td></tr> </tbody> </table>	Day	Please tick	Monday-Thursday		Tuesday- Friday		Monday- Friday												
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Tuesday- Friday																					
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B	2 to 3 year olds (Under 3's Room). For FREE FOR 2s (8.30-11.30am)	5 days FREE FOR 2's free entitlement																			
C	2 to 3 year olds (Under 3's Room). For FREE FOR 2s (12.30-3.30pm)	5 day FREE FOR 2 free entitlement																			
D	9 months – 3-years old After School Club additional fees 3.30-6pm	Days requiring for After school club? <table border="1"> <thead> <tr> <th></th><th>Mon</th><th>Tue</th><th>Wed</th><th>Thu</th><th>Fri</th></tr> </thead> <tbody> <tr> <td>3.30-4pm</td><td></td><td></td><td></td><td></td><td></td></tr> <tr> <td>3.30-6pm Tea Provided</td><td></td><td></td><td></td><td></td><td></td></tr> </tbody> </table>		Mon	Tue	Wed	Thu	Fri	3.30-4pm						3.30-6pm Tea Provided						
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E	3 to 4 year olds (Over 3s Room).	4 or 5 day Fee Paying Place /Free 30 hour place for from 8am–3.30pm x 4 days (term time only contract – Monday- Thursday, Tuesday – Friday or Monday – Friday and paying for fifth day) <table border="1"> <thead> <tr> <th>Day</th><th>Please tick</th></tr> </thead> <tbody> <tr> <td>Monday-Thursday</td><td></td></tr> <tr> <td>Tuesday- Friday</td><td></td></tr> <tr> <td>Monday- Friday</td><td></td></tr> </tbody> </table>	Day	Please tick	Monday-Thursday		Tuesday- Friday		Monday- Friday												
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30-hour code (9 months - 4 years old)	
If you are unable to apply for the code yet due to your child's date of birth, please write 'waiting for code' As soon as you have received your code it is important that you email this information into the school office 'for the attention of the admissions team'	

As a Nursery School, Golden Glitters Nursery is responsible for the delivery of integrated services to the local community. In addition to providing high quality early education and childcare we also plan services covering:

- Parenting support and specialist services
- Child and family health services
- Help into work with links to Job Centre Plus and training
- Information and advice

As part of the planning process, to improve outcomes for children under five and their families, we are required to collect data to help us monitor and evaluate services.

FURTHER DETAILS ABOUT YOU OR YOUR PARTNER					
	MAIN CARER (PARENT/GUARDIAN)			SECOND CARER (PARENT/ GUARDIAN)	
Gender (*Delete)	*Male /Female/other			*Male /Female/other	
Religion					
Do you consider yourself to have a disability, learning, physical, etc)	Yes No Please describe:			Yes No Please describe:	
Do you have a social worker allocated to your family?	Yes No			Yes No	
EMPLOYMENT DETAILS: (PLEASE TICK THE MOST APPROPRIATE BOX)					
	Main Carer			Second Carer	
Full-time parent/carer					
Employed (includes maternity/paternity leave)					
Self-employed					
Currently not in paid employment					
Education					
Training					
Long-term sick or disabled					
Other (please state)					
Housing Status:	Living with family/friends <input type="checkbox"/>	Home owner <input type="checkbox"/>	Private rent <input type="checkbox"/>	Permanent Council Tenant <input type="checkbox"/>	Temporary Accommodation <input type="checkbox"/>
Is anyone in your household in receipt of:	Income support <input type="checkbox"/>		Tax credits <input type="checkbox"/>		Jobseekers Allowance <input type="checkbox"/>

ETHNICITY CODES		
Categories	Code	Description
WHITE White Background	WBRI	British
	WIRI	Irish
	WIRT	Irish Traveller
	WGRE	Greek/Greek Cypriot
	WROM	Gypsy/Roma
	WTUR	Turkish/Turkish Cypriot
	WOTH	White Other
MIXED Mixed/Dual Background	MWBC	White and Black Caribbean
	MWBA	White and Black African
	MWAS	White and Asian
	MOTH	Any Other Mixed Background
ASIAN Asian or Asian British	AIND	Indian
	ABAN	Bangladeshi
	APKN	Pakistani
	AEAA	East African Asian
	AOTH	Other Asian Background
BLACK Black/Black British	BAFR	Black African
	BCRB	Black Caribbean
	BAOF	Other African
Chinese or Other Ethnic Group	CHNE	Chinese
	OLAM	Latin/South/ Central American
	OKRD	Other Kurdish
	OOEG	Other Ethnic Group
	NOBT	Information not yet obtained

G.P Name/Surgery:		Surgery É:	
Medical Conditions	Allergies	Dietary Requirements	
		<input type="checkbox"/>	Vegetarian (Can eat fish)
		<input type="checkbox"/>	Vegetarian (No fish)
		<input type="checkbox"/>	No Pork
		<input type="checkbox"/>	No Dairy
		<input type="checkbox"/>	No Sya
		<input type="checkbox"/>	Other :
Please note: We are a NUT FREE setting.			
I consent to the following being applied/administered to my child in the event of an emergency. Please TICK ✓ ALL that apply			
Pain/Fever reducer (eg: paracetamol suspension/ibuprofen)	<input type="checkbox"/>	Nappy Cream	<input type="checkbox"/>
Plasters (for cuts/grazes)	<input type="checkbox"/>	Parent to Supply (clearly named) if appropriate	<input type="checkbox"/>
Sun Cream (factor 30)	<input type="checkbox"/>	Teething Gel / powders	<input type="checkbox"/>
Antihistamine Syrup for stings/bites (eg Piriton)	<input type="checkbox"/>		<input type="checkbox"/>
Parent/carer signature Print Name		Date	

Please indicate if your child has any needs that may require additional or specialist support: -									
ADHD/ ADD				Other professionals supporting your child or Family:					
				Speech & Language Therapist					
ASD (e.g. Aspergers)				Educational Psychologist					
Speech & Language Social/Emotional Needs				Paediatrician					
Hearing Impaired				Occupational Therapist					
Behavioural Needs				Physio Therapist					
Vision Impaired				Dietician					
English as an additional Language				Social Worker					
Other:				Specialist Teacher					
				Other:					
OPTIONAL CONSENTS (please tick all that apply)									
I CONSENT to my child being included/displayed in videos/photos for Dorset Hall Nursery Marketing/Publicity purposes as follows:									
Website		Leaflet		Advertising		Newspaper		Articles	
Nursery Newsletter									
I CONSENT to Golden Glitters Nursery using my/my child's information in adherence with General Data Protection Regulation (GDPR) guidelines: Yes No									
<u>MANDATORY CONSENTS</u>									
By signing this Registration Form, you are consenting to the following: -									
I consent to my child going on short trips in the local surrounding areas									
I consent to written observations of my child being undertaken to monitor their development, achievements and progress. This will be recorded on their Individual Learning Journal. I understand that photographs that include my child may also be taken for the following purposes: -									
<ul style="list-style-type: none"> Evidence their development, achievements and progress (to be uploaded to their Tapestry Journal). Included in other children's 'ILJ' record, if they are in a group photograph with other children. Displayed within/around the setting. 									
I consent to my child using the internet (under supervision).									
I confirm that I will keep my child at home : -									
<ul style="list-style-type: none"> For 48 hours from the last episode of vomiting and/or diarrhoea. For 24 hours after being prescribed antibiotics. For 24 hours with treatment for eye infections. 									
I confirm that it is my responsibility to apply Sun Cream to my child prior to their attendance during sunny/hot weather.									
When necessary (eg: slight fever due to colds, pain relief for teething, ear ache, etc) I will supply my child with an appropriate fever/pain reducer clearly labelled.									
I consent to information (eg: development reports, 2 year progress checks, outside agency reports) regarding my child, to be passed onto other relevant bodies (school, health visitor, etc.) - all information will be shared with the strictest confidence.									

<p>I consent to the, Manager and/or SENCo (Special Educational Needs Co-ordinator) to contact, discuss and share information about my child's development with outside agencies/professionals. This may be necessary to support his/her development during their time at the setting, and all information will be shared with the strictest confidence.</p>	
<p>I confirm that my child is up to date with their Vaccinations and I will supply a copy of their vaccination records.</p>	
<p>I consent to emergency First Aid, advice or medical treatment being given to my child as necessary whilst my child is in your care.</p>	
<p>I confirm that I will give at least 1 MONTH's written notice to expire at the end of a calendar month (full fees remain payable) to cancel or amend my child's place. I confirm that I understand the nursery reserves the right to withdraw my child's place at any time. (One month's written notice will be provided.)</p>	
<p>I confirm that I understand the nursery terms of payment. Fees will be submitted in advance and are payable regardless of absence (i.e. sickness, holiday, appointments). I understand that the nursery cannot "swap" days due to missed sessions.</p>	
<p>I confirm that I am the legal guardian of this child.</p>	
<p>I confirm the contents of this Registration form are true and accurate I will update you of any changes as they occur.</p>	
<p>I confirm that by signing this Registration Form, I give my consent to the aforementioned and will also adhere to Dorset Hall Nursery Terms and Conditions.</p>	
<p>Parent/Carer Signature Print Name</p>	<p>Date:</p>

PLEASE READ AND SIGN THE FOLLOWING

Data Protection Act 1998

PRIVACY NOTICE:

The Data Protection Act 2018 (General Data Protection Regulation - GDPR) basis for processing is that it is necessary for compliance with a legal obligation. In compliance with GDPR, your personal information will be used for the specified purposes, kept accurate and up to date as a result of any changes to your personal circumstances. Children's Centre records are de-activated when the child reaches 5 years old. The records are deleted 6 years from de-activation.

Haringey Council's Record of Processing Activities sets out full details of why and how we use personal information. You have a right to access the information that we hold and have inaccurate information corrected. Please see the information on the [Data Protection section](http://www.haringey.gov.uk/contact/information-requests/data-protection) of our website <http://www.haringey.gov.uk/contact/information-requests/data-protection> for details of our processing activities, your legal rights relating to how we use your personal data and how to exercise those rights.

DATA PROTECTION ACT 2018 - PLEASE READ CAREFULLY AND SIGN THE FOLLOWING

- I agree that the information recorded on this form will be stored securely and used to enable the Nursery staff to offer appropriate support.
- I understand that this information may be shared with partner organisations, funding bodies and other professional agencies for monitoring and evaluation purposes.
- Information about my family may be shared with other professional agencies if there are safeguarding concerns about me or my child/ren.
- All this information will be kept in line with the General Data Protection, and I will have the right to access any information held about me or my child/ren. The schools full GDPR policy can be viewed on the school's website.
- I understand that my personal information will not be passed to organisations for marketing or sales purposes.

Main Carer signature: _____

Print Name: _____

Second Carer signature: _____

Print Name: _____

Date: _____

<i>For Official use only</i>		<i>Admissions check list</i>	
Date received		Proof of birth certificate	<input type="checkbox"/>
Name of receiver		Date of birth	<input type="checkbox"/>
		Proof of address X 2	<input type="checkbox"/>
		<i>Place applied for</i>	
		<i>Evidence submitted (if applicable)</i>	
Information entered onto E-Start	<input type="checkbox"/>	SEND	<input type="checkbox"/>
Information entered onto admission data base	<input type="checkbox"/>	Exceptional circumstances	<input type="checkbox"/>
Key Person		Sibling	<input type="checkbox"/>
CLASS		Distance	<input type="checkbox"/>
Date of Admission		Receipt provided	<input type="checkbox"/>
			<input type="checkbox"/>