**IMPORTANT PLEASE FOLLOW THESE INSTRUCTIONS:**

Naming Conventions when returning this file:

- All contract files must follow the naming convention specified below, which consists of four elements separated by dashes:

1 - <ANU party>: The name of the Family or individual who is entering into the contract.

2 - <Date of execution>: The date when the contract was signed by all parties, in the format DD\_MM\_YYYY.

3 - <Content description>: A brief description of the main subject matter or purpose of the contract. Ie ‘Beech Tree Contract\_Selsey or\_Ang to define nursery site.

4 - <Version number>: The sequential number of the contract file, starting from 1 for the original contract and increasing by 1 for each subsequent amendment or revision.

- Examples of contract file names following the naming convention are:

**FJones\_23\_05\_2023\_Beech Tree Contract\_Selsey\_V1**



**Beech Tree Childcare Contract**

East Street, Selsey, West Sussex, PO20 0BN

Ofsted Region: SOUTHEAST, Registration no: 2767618

Public Liability Insurance no: 25065383CCI (Aviva)

Name of Child:

Date of Birth:

Name of Parents:

Address:

Contact no:

Email address:

Contract Date:

Additional Info:

## **Contracted Hours**

|  |  |  |
| --- | --- | --- |
|  | Start Time | Finish Time |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |

**Charges**

* Hourly Rate: £7.50 per hour per child / £6.50 per sibling
	+ If you have one child funded, then sibling discount does not apply
* Funded Hours: Can only be used between 10:00 and 15:30 M-F
* We are an All Year (51 weeks) setting and stretch funding over the year. We do not offer Term Time Only Contracts
* Meals: £3.90 per meal if required
* Deposit: We will charge a £100 deposit for each child which is deducted from your last invoice on leaving

If paying monthly, payment is required one month in advance, by the 28th day of every month. Invoices will be raised 1 week in advance for the following months monies. Charges of £10 per day will be added if payment is overdue. If payment is not received after 5 days without prior written arrangement with the manager, then your child will be refused entry and legal action will be sought. We also accept weekly and daily advance payments.

**Late collection fee** - if you are late picking up your child without prior communication (Phone call to a senior member of staff) there is a £1.00 per minute charge after the first 5 minutes. This is payable upon collection of your child.

**Charges for absence**

* Child not attending due to illnesses/days off/holidays/bank holidays - Normal hourly rate
	+ £7.50 per hour per child / £6.50 per sibling

**Booking leave & other time off**

* Please allow at least **4 weeks' notice** of annual leave and as much notice of other leave as possible. This is to allow for staff ratio planning.

**Public Holidays**

* Beech Tree Childcare will be closed annually between Christmas (25th Dec) and New Year (1st Jan) when payment will not be required.
* Beech Tree Childcare will be closed on bank holidays. If it is a day when your child normally attends on their contracted hours, payment will still be required.

**Notice Period & Rate Changes**

* Period of notice (Chargeable) is required to end the contract and is 4 weeks in writing.
* Beech Tree Childcare reserves the right to increase the hourly rate. This will be reviewed on a yearly basis. You will be given 4 weeks written notice of any hourly rate increases.
* Beech Tree Childcare will review your contract every 12 months from date of signing (The contract remains perpetual).

**All About Me**

**Name:**

|  |
| --- |
| **What I like Playing With** |
| **What I Do not Like** |
| **What Makes Me Laugh** |
| **Festivals I Celebrate** |
| **My Friends** |
| **My Favourite Toy** |
| **My Family and Pets** |
| **My Favourite Songs** |

## **Duty of Care & Consent**

Who has Parental Responsibility for your child?

Is there any other information that would be important for us to know about your child?

For example, access/custody arrangements/family circumstances/illness/disability/other professionals that are involved with your child/family.

## **Parental Consent Statement**

Please read and confirm the following statement regarding ‘duty of care’ and confidential sharing of information

*‘****I understand that as an Early Years provider you have a ‘duty of care’ to all children in your setting. If there is a need to share information about my child with other childcare professionals, Beech Tree Childcare will keep me fully informed.***

***I understand the above and give my consent for information to be shared.***

***I confirm that all the information I have given is correct, and I will inform you of any changes.’***

Name of Parent/Carer:

Name of Child:

Signature of Parent/Carer:

Date:

## **Child Record Form**

Childs Name: Religion:

Language Spoken at Home:

Parents Name:

Place of Work:

Work no:

Parents Name:

Place of Work:

Work no:

Emergency Contact (other than parent):

Name of person who usually collects child:

Other persons who may collect child:

## **Medical Information**

Child’s Doctor, name, and address:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Immunisations & Vaccinations** | **Y/N** |  | **Y/N** |  | **Y/N** |
| Diphtheria |  | Whooping Cough |  | Tetanus |  |
| Polio |  | Measles |  | Mumps |  |
| Rubella |  | Hib Meningitis |  |  |  |

Health Visitor:

Allergies/Special Diets/Health Problems/Childhood Illnesses:

## **Permission to seek Emergency Medical Treatment**

I/we authorise members of staff at Beech Tree Childcare (Worthing Rugby Club, Roundstone Lane, Angmering, BN16 4AX) to administer first aid assistance to my/our child named below as and when necessary, or in the event of an emergency to seek medical/hospital assistance. I/we will provide Beech Tree Childcare with up-to-date details of contact numbers.

I/we understand that a member of staff at Beech Tree Childcare will not be able to authorise any treatment and that I/we as the child’s next of kin will be contacted by the medics in the event of an emergency to give permission, or in a life-threatening situation the medics will act in their professional capacity.

Name of child:

Name of parent: Signature:

 Date:

Name of parent: Signature:

 Date:

## **Beech Tree Childcare Photo Permission Form**

Name of Child:

I/we give permission for Beech Tree Childcare to take photos of the above-named child for the reasons I/we have indicated with a tick below:

|  |  |
| --- | --- |
|  | Y/N |
| To record the child’s daily routine |  |
| To record the child’s development |  |
| To share with the child’s parents |  |
| Beech Tree Childcare’s own album |  |
| Coursework for staff at Beech Tree Childcare |  |
| Beech Tree Childcare’s promotional literature |  |
| Beech Tree Childcares website |  |
| Other publications, such as the local newspaper |  |
| Other organisations’ websites |  |
| Other reasons specified by Beech Tree Childcare in the box below: |  |
|  |  |

Parent Name:

Parent signature:

Date:

## **Permissions**

Please read and authorise (Y/N) to the following permission requests set out below. If there are any requests, you do not agree to please discuss with a senior member of Beech Tree Childcare before signing the contract.

## Observations

|  |  |
| --- | --- |
| Y/N |  |

## I/we understand that ongoing observations will be undertaken of the above-named child, to follow and assess their development. These may be in the form of written statements, photographs/videos or tape recordings.

## Outdoor Play Equipment

|  |  |
| --- | --- |
| Y/N |  |

I/we agree for the above-named child to use play equipment in gardens, parks or playgrounds while in the care of Beech Tree Childcare.

## Routine outings with Beech Tree Childcare

|  |  |
| --- | --- |
| Y/N |  |

I/we agree for the above-named child to go on routine outings while in the care of Beech Tree Childcare. I understand that my child using the grounds at Worthing Rugby Club is classed as a routine outing.

## Transporting in a vehicle

|  |  |
| --- | --- |
| Y/N |  |

I/we agree for the above-named child to be transported in a vehicle while in the care of Beech Tree Childcare.

## Sun protection cream application

|  |  |
| --- | --- |
| Y/N |  |

I/we agree for sun protection to be applied to the above-named child while in the care of Beech Tree Childcare.

## **Statement & Contract**

I hereby agree to the full terms and conditions of this Early Years childcare agreement with Beech Tree Childcare and will adhere to my contracted hours and payment schedules.

Parent: Manager:

Parent Signature: Manager Signature:

Date: Date: