

# **REGISTRATION FORM**

Please complete all sides (4) then sign at the bottom of the last page.

The General Data Protection Regulation (GDPR), provisions of the Data Protection Act 2018 (DPA 2018) and the Education (School Records) Regulations (1989) protect this strictly confidential information, stored by the Care & Learning Centre (C&LC) on its child records database. The information on ethnic origin and first language is needed by the C&LC to ensure that resources are made available when required and that it offers real equality of opportunity for all pupils.

Full details about how we use this data and the rights you have around this can be found in our Data Policy on our website www.monkfieldpark.cambs.sch.ukf where you will also find our Privacy Notices. If you have any data protection queries, please contact our Data Protection Officer whose contact details are on our Privacy Notice.

CHILD'S DETAILS		
Legal Surname	as it appears on child's birth certificate	
Legal Forename	as it appears on child's birth certificate	
Middle name(s)		
Preferred Forename	Gender:	
Date of Birth		
Home Address		
Postcode	Home Telephone number:	
In Local Authority Care: If Yes, Name of Care Authority		
Name & address of previously attended pre-school setting		
Please indicate which provision you would like your child to attend		

Pre-school for funded 3 year old	Pre-school for funded 3 year old, plus additional paid pre-school sessions	
Breakfast Club	After School Club	

### **CONTACT INFORMATION**

Please provide details of those with parental responsibility and place them in the order you wish them to be contacted in an emergency. Please tell us if the information changes; we need to be able to contact you quickly if your child is ill.

# PRIORITY 1 CONTACT – THIS PERSON MUST HAVE PARENTAL RESPONSIBILITY

Title Surname Forename

Relationship to student; Parental responsibility YES /NO

Date of Birth National Insurance Number (for claiming funded hours):

Home address Postcode;

Home/Mobile telephone number Home email

Work telephone number;

# PRIORITY 2 CONTACT - THIS PERSON MUST HAVE PARENTAL RESPONSIBILITY

Title Surname Forename

Relationship to student; Parental responsibility YES /NO

Date of Birth National Insurance Number (for claiming funded hours):

Home address Postcode;

Home/Mobile telephone number Home email

Work telephone number;

# SEPARATED PARENT INFORMATION – THIS PERSON MUST HAVE PARENTAL RESPONSIBILITY For parents not living with child. Please specify contact priority (if any)

Under the 1989 Children's Act all parents have the right to receive information about their child's progress.

Title Surname Forename

Relationship to student; Parental responsibility YES /NO

Home address Postcode;

Home/Mobile telephone number Home email

Work telephone number

Court Case Yes/No Address can be Disclosed Yes/No

### EMERGENCY CONTACT – IF NO PERSON WITH PARENTAL RESPONSIBILITY IS AVAILABLE

If you provide information on behalf of anyone else, then in doing so you are confirming that you explained how their information may be used by us and they have given permission for you to do so. You have informed them that their data will only be used by the C&LC if the C&LC is unable to make contact with a person with Parental Responsibility, that their data will be deleted once your child leaves Monkfield Park CLC, or the emergency contact no longer wishes to have their data stored by the C&LC. You, the contact with Parental Responsibility, will inform us if other contacts no longer wish for their data to be held by us.

Signed	:		(Person with Parental Responsibility)
Title;	Surname;	Forename	
Contact t	elephone numbers:		
		MEDICAL DETA	ILS
Doctors S	Surgery:		
Address	and telephone number		
Please stallergies)	•	s of which you wish the C&LC to	be made aware of, (e.g. asthma, epilepsy,
Please st	tate if your child has a me	dically diagnosed food allergy or	intolerance:
Does your child have any Special Needs Provision YES/NO?			
If YES *	SEN Support/*EHCP *Sta	atement? (*Please delete acco	rdingly)
Does you	ur child have in place an E	early Health Assessment (EHA)?	YES/NO?
		DEDCOMAL INFORM	

# PERSONAL INFORMATION

To help us in monitoring equal opportunities you are asked to complete the following:

1. Country of birth

Nationality;

2. Family's Ethnic Origin. (Our ethnic background describes how we think of ourselves. This may be based on many things, including, for example, our skin colour, culture, ancestry or family history. Ethnic background is not the same as nationality or country of birth.)

,	,
White - British	
White - Irish	
White - Traveller of Irish Heritage	
White - Gypsy/Roma	
White - Any other White background	
Mixed - White and Black Caribbean	
Mixed - White and Black African	
Mixed - White and Asian	
Mixed - Any other mixed background	
Asian or Asian British -Indian	
Asian or Asian British - Pakistani	
Asian or Asian British – Bangladeshi	

Asian, Nepali, Sinhalese, Sri Lankan Tamil)	
Black or Black British -Caribbean	
Black or Black British -African	
Any other Black background	
Chinese	
Any other ethnic group – please circle one. (This includes Afghan, Arab, Egyptian, Filipino, Iranian, Iraqi, Japanese, Korean, Kurdish, Latin American, Lebanese, Libyan, Malay, Mauritian, Moroccan, Polynesian, Thai, Vietnamese, Yemeni)	
I do not wish an ethnic background to be recorded	

Any other Asian background (This includes African

3. Date of arrival in UK (if relevant)

5.	Religion		
If the	ere are any religious or cultural practices of	which the C&LC should be aware, pleas	se specify.
6.	Please give the name, gender and date or Monkfield Park Primary School.	of birth of any other children in your famil	y who are attending the C&LC
	Name	Date of Birth	Male/Female
	Name	Date of Birth	Male / Female
	M	ARKETING MATERIAL	
Plea	The Tark I milary content	ner you wish to receive marketing material YES/NO YES/NO	al regarding the following:-
I certify that, to the best of my knowledge, the information on this form is correct.  Signature:  Parent/Guardian			
	gnature; ate	Taroni odaralari	
clcof	u have any queries before returning this for fice@monkfieldpark.cambs.sch.uk.  se return this form when completed to:-  Monkfield Park Care & Learning Centre School Lane Great Cambourne Cambridgeshire CB23 5AX		e 01954 273301 or e-mail
	00 0, 0,		

Other language(s)

4.

First language