**ADDITIONAL CHILDCARE AGREEMENT**

Parent(s) of       Code

I hereby agree to pay an additional cost of (please tick the relevant box below)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Extra Day Times | Cost | Half Day Hours | Cost | Extra Hour | Cost |
| 7am-7pm  7am-6pm / 8am-7pm  8am-6pm | £90.00  £82.00  £75.00 | 7am-1pm  8am-1pm  1pm-7pm  1pm-6pm | £50.00  £38.00  £50.00  £38.00 | (needs to be booked IN ADVANCE otherwise invoiced as Late Collection Fee) | £19.00 |

|  |  |  |
| --- | --- | --- |
| If you are unable to collect on time there is an additional charge of £1/min. | | |
| To be filled and signed by manager/room leader | | |
| Late Collection fee | Total minutes late | Total Cost |
| £1.00 per minute |  |  |

|  |  |
| --- | --- |
| **YOUR CHILD** | |
| Name       Date of Birth Click here to enter a date. | |
| Gender | |
|  | |
| Address House Nr/Name       Language spoken at home | |
| Street       Any other Languages | |
| Town       Religion | |
| City       Position in Family | |
| Postcode       Number of Brothers    Sisters | |
| **Allergies /medical condition**  **Diet preferences or food intolerances** | |
| **MOTHER’S/GUARDIAN DETAILS**  Name  Tel Home  Mobile  Tel Work  E-Mail  EMERGENCY CONTACT 1 (if we can’t get hold of parents)  Name  Tel. no :  PASSWORD for confirming of authority 1 | **FATHER’S/GUARDIAN DETAILS**  Parental Responsibility Y/N If NO does this parent have legal access?  Name  Tel Home  Mobile  Tel Work  E-Mail  EMERGENCY CONTACT 2 (if we can’t get hold of parents)  Name  Tel. no :  PASSWORD for confirming of authority 2 |

**Dreammaker Day Nursery Additional Childcare Terms and Conditions**

**As a Parent/Carer, I confirm that:**

* I am fully aware of the terms and conditions contained within this document. I will abide by them fully should I choose to apply for an additional childcare place at Dreammaker Day Nursery.

**I understand and accept that:**

* This agreement applies to all parent (both existing parents and new parents)
* I agree to pay, immediately, upon getting an invoice and prior to using the agreed service. This payment covers for all necessary changes Dreammaker has to make, such as staffing-child ratios, meal preparation, insurance, etc:
* Payment shall be made by bank transfer to the following account.

Payee: **DreamMaker Day Nursery** A/c: **3641 3904**  Sort code: **09-01-27**

* If this remains outstanding for any reason I agree to pay an additional administrational surcharge of £15.00 per week until the amount is cleared.
* If the booking is cancelled **30 days or more** prior to the booked service date, the cost of booking will be 100% refunded within 7 days of cancelation (I will provide my account details to [accounts@dreammakerdaynursery.co.uk](mailto:accounts@dreammakerdaynursery.co.uk)).

If I cancel **within 30** days prior to the booked service date there I will not be entitled to a refund.

* For the care and safety of the DreamMaker children, entry may be refused for my child is suffering from an infectious illness. (Please refer to the NHS infectious diseases list available from the Office).
* DreamMaker cannot be held responsible for consequences arising from any allergy/illness of which I have not advised.
* Any carer who considers that my child may have been abused or neglected has a duty to report this to the relevant legislative bodies.
* DreamMaker cannot be held responsible for any unlabelled clothing or personal items belonging to my child.
* My child is not permitted to wear jewellery at DreamMaker, for health and safety reasons.
* DreamMaker has a legal obligation under the Data Protection Act to ensure that all information held and processed about me complies with the principles of the Act. The Act requires all personal information to be treated in the strictest confidence and to be used only for purposes of which I am are aware. DreamMaker will treat all of my personal information as private and confidential. Nothing about me will be disclosed to anyone, other than exceptional cases permitted by law. These are:
  + - * where DreamMaker is legally compelled to do so;
      * where there is a duty to the public to disclose;
      * where disclosure is required to protect DreamMaker’s interest;
      * where disclosure is made at my request or with my consent.
* My contact details will be used in providing care for my child at DreamMaker Day Nursery.
* Certain information collected may be classified as sensitive and DreamMaker can only use such data where it has my explicit consent.
* If I have any questions or concerns on the use of my personal information, I may contact DreamMaker at any time.

**I agree to:**

* Accept responsibility for updating DreamMaker in writing in respect of all information contained herein, particularly any change in family contact details, ongoing illnesses, allergies and dietary requirements.
* Maintain the security of the Nursery by ensuring that I do not allow any stranger to enter the buildings.

#### Drop my child off and collect my child within the times I have paid for, and if it is not possibile to come in agreed time, I will abide by the Late Collection Fees/proceedures.

* Arrive 15 minutes prior to the end of my booked session to allow time to obtain feedback before collection.
* Respect DreamMaker’s rules and methods of functioning.

Date of additional childcare:Click here to enter a date. Time selected:

Parent’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_