Contract between Parent and Setting Cynfran Pre-school

Name of Group: Cynfran Pre-school

Address: C/O Ysgol Cynfran, Dolwen Road, Llysfaen, Colwyn Bay Postcode: LL298SS Tel. No: 07821120933 Email: cynfranpreschool@hotmail.com Facebook: Cynfran Pre-school Messenger: Cynfran Pre-school Name of Leader/Supervisor: A Knight & T Barrett-Chalk Child's Name.......DOB.......DOB..... Address Postcode......Tel. No......Tel. No..... Parent/Carer's Name(s)..... Tel No (Home)......Tel.No (Work)...... Email address..... Agreement to start on Days Agreed: Tues Wed Thurs Fri Mon Time agreed Arrival......Departure......Departure..... Session: **Morning** Afternoon **Full Daycare** (*Please circle the days/sessions you wish your child to attend) Number of sessions agreed to per week (You will be charged for these sessions each week whether your child attends or not) **GPDR/Privacy** I have read and consent/ do not consent* to Cynfran Pre-school retaining information about my child:..... and myself (parent/carer)..... Signed Parent / Carer..... Photographs/Children's Work I agree to photographs of my child being taken during my child's time at pre-school. I understand that the photographs taken of my child could be used as evidence for educational agencies and displayed within the pre-school setting. I understand and agree that my child's image maybe included on group pictures and used in leavers book or used in Ysgol Cynfran's newsletters. And once the images leave Cynfran Pre-school, I understand Cynfran Pre-school is not responsible for how they are used once handed to the parents. Signed Parent / Carer..... I agree to Cynfran Pre-school displaying my child's work in the setting. I understand that my child's work could be used as evidence for educational agencies. Signed Parent / Carer..... Observations and information sharing

I consent to Cynfran Pre-school staff observing and recording my child progress and sharing my

Signed Parent / Carer......

child's progress with Ysgol Cynfran Nursery and any other relevant agencies.

Seesaw

Jeesaw	
•	I consent to Cynfran Pre-school setting up a Seesaw account for my child. I understand that this is a secure digital portfolio accessible by password only, which only staff and parents will haveaccess to. I understand that photographs of my child will be accessible via Seesaw. I agree to provide my email address
Financia	al information
•	I understand my financial information will be held at the Treasurer's address as well as at Cynfran Pre-school, and the bank statements will include mine and my child's name as reference. Signed Parent / Carer
•	I consent to Cynfran Pre-school passing financial information to set up a Parent Pay account in Ysgol Cynfran, I understand Ysgol Cynfran will have full access to any payments made to Cynfran Pre-school. Signed Parent / Carer
Fees/Fu	unding
•	I agree fees are payable weekly @ £17.50 per session (9am-12.30 / 11.30-3pm) or £12.50 per session (9.00am-11.30am / 12.30-3pm). 2 hour session is £10.00 per session (9am-11am). Full Daycare session is £30 per session. Fees are charged for any sickness or absences including holidays and outings. All booked days MUST be paid for in advance. Signed Parent / Carer
•	I agree to the terms of the 30 hour funding offer. I understand that Cynfran Pre-school only offer the provision during term times only . Signed Parent / Carer
•	I agree to the terms of Flying Start funding of 2.5 hours per day. Any additional hours to this will be charged at standard fee rate. I understand that Cynfran Pre-school only offer the provision during term times only Signed Parent / Carer
•	I understand the 10 hours early education funding is 2 hours education per day, and any additional hours will be charged at full fee rate . Signed Parent / Carer
Collecti	ons from Pre-school
•	I agree to my child being collected at the designated time by myself or by those I have specified on the registration form. I understand that Cynfran Pre-school staff will not release my child to anyone other than who is authorised to collect and I understand they will need a password and ID. I agree a late payment charge will be charged if I am 10 minutes later than the designated time. I agree to inform anyone picking up my child in my absence will have to bring photographic ID and be provided with a password. Confidential PASSWORD is
•	I consent to Ysgol Cynfran staff taking or collecting my child to or from Early Years class or After school club (if available) in Ysgol Cynfran.

Outings I agree to the pre-school taking my child on short outings outside the pre-school grounds within the local area Signed Parent / Carer..... **Behaviour** I agree to a member of staff picking up my child if they are demonstrating behaviour that may injure themselves, property or others. I agree to the staff member taking my child outside to self regulate in these circumstances Signed Parent / Carer..... Medical/Sickness /Emergencies I agree not to send my child to pre-school if unwell and to inform pre-school promptly. *In cases of* vomiting and diarrhoea, children must be free of symptoms for 48 hours before re-attending preschool. Signed Parent / Carer I agree to collect/make arrangements for my child to be collected from pre-school immediately if I am informed that s/he is unwell. I agree to inform anyone picking up my child in my absence will have to bring photographic ID and be provided with a password. Confidential PASSWORD is Signed Parent / Carer I give permission for my child to be given emergency medical treatment which may be necessary Signed Parent/ Carer I understand that the completed registration forms part of this contract and has been signed. Signed Parent / Carer..... I understand it is my responsibility to notify the pre-school of any change in circumstances relating to the above or which may affect my child. Signed Parent / Carer..... I am aware of */ have received copies of */ read and fully understand */ the policies and *please delete as necessary. procedures of the pre-school.

Available at www.cynfranpreschool.org.uk Hard copies available on request.

Review Date, annually or sooner if a parent notifies the group of change, changes must be made in writing.

*All information must be completed

** Please circle required option

Amended 31 July 2023

Parental Permission Form

Some children attending the provision may have additional learning needs, physical disabilities, or are placed here by referring agencies. Their plan of care will be developed through consultation between the pre-school, the parents and supporting agencies so that the best possible care can be provided.

Occasionally while staff are caring for the children in their care, they may detect a problem (such as a hearing loss or sight deficiency). This will always be discussed with the parent.

This form gives pre-school staff permission to discuss certain information to other relevant agencies, for help and/or support should the need arise, or to liaise with referring agencies to enable us to provide the best care we can for your child.

Name of Child:-	
Gender:-	Male / Female
Address:-	
Telephone Contact:-	
Date of Birth:-	
I, the parent of	give permission to to liais
with relevant su	pporting agencies to enable the Pre-school to provide the most suitable care for my
child.	
Signed	:
Print Name	:
Date	:

Personal Details Record

		Date of Birth	M	ale / Female
Home Address				
Telephone Number				
=				
raichts Name & Nauress				
Place of work (mother)			Telephone Number	
Place of work (father)			Telephone Number	
Who to contact in an eme	ergency? (Full na	me, relationship to	o child & contact number)	
			onship to child & contact nu	
Password				
Child's Doctors Name & A	ddress			
Health Visitor			Telephone Number	
_				
Allergies(Food)/Dietary N	eeds			
Immunisations (please tic	k the box to indi	cate the child has	had the vaccine)	
₽ DPT, Polio and	HIB (2 months)			
🐉 DPT, Polio and	HIB (3 months)			
🐉 DPT, Polio and	HIB (4 months)			
₩ MMR (12-15 m				
Meningitis C	,			
Other Infectiou	ıs Illness			
Chicken Pox				
Religion		Language of the	home	
Other relevant information	n			

General Data Protection Regulation/Privacy Consent Form

I have <i>read and consent/ do not consent*</i> to Cynfran Pre-school retaining information about my
child:
and myself (parent/guardian*):
to be used as stated in the GDPR and privacy policies. I understand that all information retained by
Cynfran Pre-school is kept for the time periods stated on the Data Retention Chart and that I can
request to look at any records held at any time.
Signed
Date

Data Retention Chart

Children's records	Retention period	Status	Authority
Children's records	3 years	Requirement	CIW
Photographs	3 Years	Requirement	
Registers, medication record books and accident record books pertaining to the children	Until the child reaches the age of 21 - or until the child reaches the age of 24 for child protection records	Recommendation	Early Years Wales Insurance Providers
Records of any reportable death, injury, disease or dangerous occurrence	3 years after the date the record was made	Requirement	The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) (as amended)
Personnel records	Retention period	Status	Authority
Personnel files and training records (including disciplinary records and working time records)	6 years after employment ceases Senior management records are kept for life.	Recommendation	Chartered Institute of Personnel and Development
Pay	i.	4-	
Wage/salary records (including overtime, bonuses and expenses)	5 years	Requirement	Taxes Management Act 1970
Statutory Maternity Pay (SMP) records	3 years after the end of the tax year to which they relate	Requirement	The Statutory Maternity Pay (General) Regulations 1986
Income tax and National Insurance returns/records	At least 5 years after the end of the tax year to which they relate	Requirement	The Income Tax (Employments) Regulations 1993 (as amended)
Redundancy details, calculations of payments, refunds, notification to the Secretary of State	6 years after employment ends	Recommendation	Chartered Institute of Personnel and Development
Health & Safety			
Staff accident records (for organisations with 10 or more employees)	3 years after the date the record was made (there are separate rules for the recording of accidents involving hazardous substances)	Requirement	Social Security (Claims and Payments) Regulations 1979
Records of any reportable death, injury, disease or dangerous occurrence	3 years after the date the record was made	Requirement	The Reporting of Injuries, Disease and Dangerous Occurrences Regulations 1995 (RIDDOR) (as amended)
Accident/medical records as specified by the Control of Substances Hazardous to Health Regulations (COSHH)	40 years from the date of the last entry	Requirement	The Control of Substances Hazardous to Health Regulations 2002 (COSHH)

Assessments under Health and Safety Regulations and records of consultations with safety representatives and committees	Permanently	Recommendation	Chartered Institute of Personnel and Development
Financial records	Retention period	Status	Authority
Accounting records	3 years from the end of the financial year for private companies, 6 years for public limited companies	Requirement	Companies Act 2006
	6 years for charities	Requirement	Charities Act 2011
ParentPay	School keep ParentPay records for the duration your child is at the school. This information can be deleted on request.		
Administration records	Retention period	Status	Authority
Employers' liability insurance records	40 years	Recommendation	Child Minding and Day Care (Wales) Regulations 2010 (as amended)
Public Liability Insurance records	21 years 4 months	Requirement	Child Minding and Day Care (Wales) Regulations 2010 (as amended)
Minutes/minute books	10 years from the date of the meeting for companies	Requirement	Companies Act 2006
	6 years from the date of the meeting for Charitable Incorporated Organisations	Requirement	The Charitable Incorporated Organisations (General) Regulations 2012
	Permanently	Recommendation	Chartered Institute of Personnel and Development

This chart was sourced from the Pre School Alliance - Retention Periods for Records Aug 13.pdf

Useful information

Guide to the General Data Protection Regulation (GDPR) - https://ico.org.uk/media/for-organisations/guide-to-the-general-data-protection-regulation-gdpr-1-0.pdf

This Data Retention Chart was passed for use in Cynfran Pre-school

On: May 2018

By: Jennifer Haven Position: Responsible Individual

Date of planned review: October 2023

Nappy Changing Consent Form

Parents need to provide nappies and wet wipes for their child and nappy rash cream if required. Cynfran Pre-school will provide aprons, gloves, hand sanitiser, spatula's, changing mat and a suitable changing area in compliance with <u>CIW minimum standards</u> and the <u>All Wales Guidance for Infection Prevention</u> and Control for Childcare Settings (0 – 5 years).

All staff have enhanced DBS checks.

When your child needs their nappy changing, they will be taken to the changing area in the toilet area of the pre-school. If your child has nappy rash staff can administer cream to the area but a medical consent form must be signed each day cream is needed **BEFORE** staff can apply.

All soiled nappies will be disposed of hygienically in provided yellow bags as per compliance with Conwy County Borough Council Environmental Health recommendations regarding the disposal of trade waste. Children will never be left unattended when on the changing station. The changing station and mat are thoroughly cleaned each time a child is changed.

I give staff at Cynfran Pre-school permission to change my child......nappy. I

understand that staff may phone me in the event that my child refuses a nappy change.
Signed
Please provide any additional information below
IF YOUR CHILD SOILS THEIR CLOTHES AND UNDERWEAR DURING PRE-SCHOOL
I give staff at Cynfran Pre-school permission to change my son/daughters clothing. I understand that if
don't provide a change of clothes staff at Cynfran Pre-school will phone for me to collect my child.
I understand that if my child is fully potty trained and having frequent accidents then staff at Cynfrai
Pre-school may phone me to collect or change my child.
If clothing is heavily soiled, I am happy to accept the soiled clothing.
Signed
I would like the soiled clothing to be thrown away.
Signed

Dietary Needs / Food Allergies Form

I understand I must complete the form below and give as much detail as possible, if my child isn't allowed any specific foods or has a food allergy/special dietary needs.

Childs Name
D.O.B
Doctors Name
Surgery
Telephone number
Food Allergy
Dietary need
Detailed information on the food your child CANNOT eat
Emergency Contact Name
Telephone number
Emergency procedure to use if an allergic reaction occurs
Any medication / dosage
Parental consent
I understand I will also need to fill out a medication consent form Parent /Carer signed
Any further information

"Learning through play"

Ysgol Cynfran Dolwen Road Llysfaen Colwyn Bay Conwy LL298SS

Charitable Incorporated Organisation (CIO)
Registered charity no. 1174061



Dear Parents:

Cynfran Pre-school uses Seesaw (http://seesaw.me), a secure online journal where the children can document and reflect on what they are learning in their sessions. Your child will be able to add the things we work on (including photos, videos, worksheets, drawings and voice recordings) to their Seesaw journal and we can share them privately with you and other family members to view and comment on throughout the year. You will need to download the app (available on Apple and Android devices) to access your child's work.

In order for your child to use Seesaw, the app needs your child's name in order to be able to associate work like their photos, videos or voice recordings with their account. Seesaw only uses this information to provide the service and doesn't advertise in Seesaw, create profiles of students, or share or sell your child's personal information or journal content. You can read more about their strong privacy promises here: https://web.seesaw.me/privacy.

Under the General Data Protection Regulation (GDPR), in order for your child to use Seesaw, Cynfran Pre-school must get your consent. For more information on GDPR, please refer to our policy or visit https://ec.europa.eu/info/law/law-topic/data-protection/reform/rights-citizens.

Cynfran Pre-school hopes that your child will enjoy using Seesaw to document and share their learning this year. Please sign below and return this permission slip so that your child can use Seesaw.

Please sign below and return the form.

I give consent for my child, listed below, to ι	use Seesaw for Pre-school activitie	es.
Child's Name:		
Parent Printed Name:		
Parent Signature:	Date:	-
Email Address:		

<u> All About Me – Children's Input</u>

Please fill out the below form so we can get to know your child a little before they come to the setting.

My new teacher's name in	All About Me! Things I'd like my new teacher to know about me.		
My name is			
My birthday is			
My brothers and sisters are called	A picture of me.		
My favourite colour is	My 3 best friends are		
My favourite food is	3		
My favourite toy or game is	Out-of-school activities I enjoy are		
My favourite things at school are			
	Things that I am really good at are		
My favourite TV programme is			
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