



Jigsaw Childcare Registration Form

Childs' full name: _____ Date of Birth: _____

Home address _____

Email Address _____

Date of Commencement: _____ Date Ceased Attending: _____

Parents/Guardian

Name: _____

Name: _____

Work Address: _____

Work Address: _____

Mobile: _____

Mobile: _____

Work contact: _____

Work Contact: _____

Home Address if different from the child: _____

Who does the child live with: _____

Authorised people to collect child (other than parents/guardian)

Person 1 _____ Number _____

Person 2 _____ Number _____

Person 3 _____ Number _____

Nominated emergency contact person

Name _____ Number _____



Photo of your child:



Permission form

Outings:

I/we hereby give my/our permission for my/our child to partake in walks and other outings outside the preschool grounds on the understanding that the adult/child ratio as recommended by the insurance company will be adhered to at all times.

Signed: _____ (Parent/Guardian)

Signed: _____ (Childcare Manager)

Date: _____

Accident/Emergency consent:

I/we hereby give my/our permission to the management of Jigsaw Childcare to act on my behalf in case of an emergency and/or accident and to take such action as may be necessary for the benefit of my/our child.

Signed: _____ (Parent/Guardian)

Signed: _____ (Childcare Manager)

Date: _____

Permission to be photographed or video recorded while in the care of childcare staff.

Permission to be photographed or video recorded under the supervision of the childcare manager. (Please note these photos will only be used within the setting. Photos will never be posted on social media without your consent.)

Signed: _____ (Parent/Guardian)

Signed: _____ (Childcare Manager)

Date: _____

A deposit of €50 is required when enrolling your child to secure their place. This deposit will be returned one month after your child's commencement date.