



ASTMOOR PRIMARY SCHOOL & NURSERY PUPIL REGISTRATION FORM

Details of Child

1.	First Name (Please underline name usually used)	
	Legal Surname	
	Any other name the child has been known by	
	Date of Birth	
	Position of Child in Family	
	Permanent Home Address	
	Post Code	
	Telephone Numbers (work, home, mobile)	
	Gender	

Parent/Carer with whom the child currently resides

2.	Full Name (first name and surname)	
	Mr/Mrs/Miss/Ms (please state)	
	Are you the parent of the child named above	Yes/No
	If not, please state your relationship to the child, if a relative or carer/guardian, please specify (e.g., auntie, grandfather, Foster Carer Legal guardian etc)	
	If you have cared for, or intend to care for the child for 28 days or more and are not the child's parent/step parent by marriage or close relative please state	Yes/No Have Halton Borough council been informed? Yes/No
<i>Children who are cared for on a full time basis by people other than their parents or a close relative may be in a private fostering arrangement. There is a legal requirement to inform Halton Borough council's children's social care of such arrangements.</i>		
	Permanent Address (including postcode)	
	Telephone numbers (work, home, mobile)	

Please give details of all persons who have parental responsibility for the child

3.

	Court Order	Full Name	Relationship to the child	Home address including postcode	Telephone numbers (work, home, mobile)
1					
2					
3					
4					

Contact in case of emergency - please place in order you would wish them to be contacted

4.

Name	Address	Telephone numbers (work, home, mobile)

Person who will normally collect your child from school

5.

Name	Address	Telephone numbers (work, home, mobile)

Previous School(s) / Nursery/ Playgroup

6.

Name	Address	Telephone number	Dates attended

Health and Development Record

Important: Please fill in this section in as much detail as you can please.

Child's Name				
Date of Birth:				
Doctor:				
Surgery Address:				
Telephone:				
Health Visitor:				
Telephone:				
Does your child have any medical conditions? (e.g. asthma, epilepsy, diabetes)				
Is your child allergic to anything? (e.g. foods, medicines/creams, plasters)				
Who is to be contacted if permission is required for medical treatment?				
In the case of a medical emergency where parent/carer/named person cannot be contacted I give permission for my child to receive emergency medical treatment from trained personnel.			Yes/No	
Medical plan attached Y/N		Risk Assessment form attached Y/N		
Dietary needs - Please note any specific dietary needs of the child				
Has your child been see for any of the following?	Y/N	Date First Attended	Name of Professional	
Speech and Language difficulties - Speech Therapist				
Sensory Services (HI/VI)				
Eye health – sight problems				
Hearing – does your child have problems with hearing or wear hearing aids				
Physiotherapist/ Occupational Therapist				
Child Development Centre				
Hospital Consultants				
Behavioural Problems – has your child been seen by an Educational Psychologist?				
Other				
❖ Does the child have a Local Authority Education Health Care Plan or Enhanced Provision Entitlement? (please tick)			Yes	No
❖ Is the child looked after by Halton Borough Council or any other Local Authority? (please tick and indicate which local authority)			Yes Which local authority?	No
❖ Does the child have an allocated social worker or family worker?			Yes	No
If yes please give their name:				

Meal Arrangements (please tick)

Free School Meal	
Paid School Meal	
Packed Lunch	
Home	
Other (please give details)	

Transport Arrangements (please tick)

Walk	
Car	
Bus	
Taxi	
Other (please give details)	

Additional Information

Child's Country of Birth	
Child's First Language	
Child's Religion	
Child's Ethnicity	See table below

White		Mixed	
British		White and Black Caribbean	
Irish		White and Black African	
Traveller of Irish Heritage		White and Asian	
Gypsy/Roma		Any other mixed background	
Any other white background			
Asian or Asian British		Black or Black British	
Indian		Caribbean	
Pakistani		African	
Bangladeshi		Any other Back Background	
Any other Asian background			
Chinese		Any other ethnic background	

This information was provided by:

Parent	<input type="text"/>
Pupil	<input type="text"/>

Signature: Parent/Carer Date:

Signature: School Representative Date:

❖ Data Protection Act

Personal information provided on this form is treated in confidence and complies with the requirements of the Act.

Extra Information

Please use this section to give us any extra information that you think may be important to the school

Health

Family

Social Care

Child's year group on the date of admission:

For Office Use Only

Date of Admission

Admission No

UPN if known

Pupil Premium

We need information about you and your child, so that we can provide them with the best education and support by making sure the school receives all the governments funding to which it is entitled.

Family Income and Benefit Details

Is your family income over £16,190 per year? (Please place **X** in the appropriate box)

Yes No

Are you in receipt of working tax credits? Yes No

If you have ticked yes to either of the boxes above, please go to the photograph consent section

	Parent/Carer 1	Parent/Carer 2
Surname		
First name		
Date of birth		
National Insurance number		

Please place an X in this box if you are in receipt of any of the benefits listed below:

- Income Support (IS)
- Income-based Jobseekers Allowance (IBJSA)
- Income-based & contribution based job seekers allowance or employment support allowance on an equal basis
- Income related employment and support allowance (IRESA)
- Support from NASS (National Asylum Support Service) under part 6 of the Immigration and Asylum Act 1999
- The guarantee element of the State Pension Credit
- Child Tax Credit (with no Working Tax Credit) with an annual income which does not exceed £16,190 or
- Working tax 2run on2 – the payment someone may receive for a further four weeks after they stop qualifying for working tax credit.
- Universal Credit

If you are not sure whether your joint income is over £16,190, or whether you are in receipt of one of the benefits listed above – please place an X in the box below, and we will check whether your child is eligible for pupil premium funding for your school.

Photograph/Video consent – please tick the appropriate box(es) below if you will allow your child’s photograph to be used in the area’s stated:

Child’s Name.....

Displays around school	<input type="checkbox"/>	In the schools prospectus (welcome pack), newsletters or the local paper – items will appear on the website	<input type="checkbox"/>
For use on other educational websites, including Halton Borough Council	<input type="checkbox"/>	Recording on a CD for an event (e.g. school performance)	<input type="checkbox"/>
For publishing in the media as part of schools involvement in an event	<input type="checkbox"/>	For use out of school in local publications/displays	<input type="checkbox"/>

<p>Local visit consent – We would like to ask for you to give permission for school to take your child out of school on local visits, for example to the park, local authority sports events or other schools. Children may walk or use agreed transport. You will be informed of the visit, however a permission slip will not be required for each individual visit if you tick the box giving permission:</p> <p>I give permission for local visits <input type="checkbox"/></p>	<p>Internet consent – As part of your child’s learning, they will be offered access to the internet. All pupils must have parental permission before being allowed access to the internet. Please tick the box below to give permission:</p> <p>I give permission for Internet access <input type="checkbox"/></p>
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Data Protection Act 1998: The school is registered under the data protection act for holding personal data. The school has a duty to protect this information and to keep it up to date. The school is required to share some of the data with the local authority and with the DfE.

Signature (parent/carer):	Date
Name (please print):	Relationship to child:

