

New Child Registration and Parental Declaration Form 2018/19 (Version 3: revised 27/04/2018)

- This form is solely for the use of the early education and childcare provider to gain the required information to complete census claims for early education and childcare offers for two, three and four year olds.
- Information on this form will be electronically submitted to the Local Authority via a secure online Provider Portal to allow them claim early education and childcare funding for your child.
- One form to be completed per child in BLOCK CAPITALS by the adult with parental responsibility.
- The provider will confirm how the information will be held securely for the period of the funding claim
- The information will be retained after the closure of the funding claim by the provider as a requirement of the financial audit process. A copy of the form will be returned to the parent or carer.

Section 1 – (Personal Information)

Provider details

Provider Name		Postcode	
Registration date of child details at the provision	___/___/20___	Child's start date	___/___/20___

Child details

Child's Forename(s) (as shown on birth certificate)		Child's Surname (as shown on birth certificate)	
Child is known as		Home/First Language	
*Child's Date of Birth	___/___/20___	Gender	Male/Female
**Address and postcode			

Parent / carer details

First Name		Surname	
Contact Number		Email Address	
Home Address and postcode if different to the child			

Evidence checked – The childcare provider will need to confirm proof of date of birth and proof of address to submit a claim for funding. This information must be seen and not copied.

Proof type	Proof seen	Proof type (please delete as appropriate)
Child's Date of Birth	Yes / No	*Birth Certificate, Passport, Medical Card
Parents Address	Yes / No	**dated within last 3 months e.g. Council Tax bill / Gas Bill / Electricity Bill / Water Bill / Bank Statement

Documents seen by (name of staff member)		Date documents seen	___/___/20___
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Parent initials _____

Section 2 – (Funding Claim)

Children can attend at no more than two providers in a single day, the funded hours and weeks of attendance must be confirmed below. Any hours attend over the free entitlement will be chargeable; your provider will provide you with access to written confirmation of fees and charges.

Provider Name(s)	Please enter total free early education and childcare hours attended each week and the type of offer i.e. term time or stretched						
	Mon (hours)	Tue (hours)	Wed (hours)	Thur (hours)	Fri (hours)	Total hours	Term time/ Stretched
A							
B							
C							

Medical/Special Educational Needs and / or Disability - All funded early education and childcare providers have Special Educational Needs Coordinators who ensure children can access their early education offers based on their needs. Please summarise below any additional needs your child may have that you wish the early education and childcare provider to be aware of.

Disability Access Fund (DAF) Declaration

Three and four year olds in receipt of Disability Living Allowance (DLA) may be eligible for an additional annual lump sum Disability Access Fund (DAF) payment of £615 per year to support them in the provision.

Is your child in current receipt of Disability Living Allowance (DLA)?	Yes		No	
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Please provide a copy of page one (1) of your child’s DLA award notice as proof of entitlement. A copy of the form will be sent to the Local Authority to allow the funding to be paid to the provider. Please state the name of the childcare provider you wish to nominate to receive the DAF payment. The payment cannot be transferred or split between providers.

Nominated Provider for DAF funding	
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Parents applying for 30 hours childcare following their registration with the Childcare Service at (www.childcarechoices.gov.uk) will need to provide their 30 hour code, (NiNo) and date of birth (DOB). **Parents applying for Early Years Pupil Premium** will need to provide their National Insurance Number (NiNo) and date of birth (DOB).

Providers will submit the information for validation to the Local Authority online and return this slip to you once the checks have been completed.

Parent 1 NiNo		Parent 1 DOB	
Parent 2 NiNo		Parent 2 DOB	
30 hours code	(11 digits - not for EYPP)		

Parent initials _____

Parent with legal responsibility - Early Education and Childcare Funding Declaration

This page must not be detached from the main form. A copy of the whole form must be made available to the parent.

Child's Forename		Child's Surname	
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- I have been given a copy of or electronic access to, the parent guide to early education and childcare funding.
- I confirm that the information I have provided above is accurate and true and I have added my initials to page one and two of the form.
- I understand and agree to the conditions set out in this document and I authorise the named early education and childcare provider on the front of this form to claim early education and childcare funding as agreed above on behalf of my child.
- I will pay a registration fee if required and understand that this will be returned to me in full within 4 weeks of my child starting at the provider.
- I agree that the information I have provided can be shared with the Local Authority and Department for Education, who will access information from other government departments to confirm my child's eligibility and enable this provider to claim the 30 hours extended childcare offer, Early Years Pupil Premium (EYPP) or Disability Access Fund (DAF) on behalf of my child as applicable.
- I confirm that if my circumstances change, I will update my early education and childcare provider at the earliest opportunity.
- I agree that the Local Authority will use the information I provide to process my request for funded early education and childcare and will contact other sources as allowed by law to verify my entitlement.
- I understand that data provided may be used to ensure accuracy of eligibility records for early education and childcare offers across the Local Authority to check against fraud.
- I agree to the Local Authority using this information to enable my child's early education and childcare provider to claim the early years funding for my child.

Parent/Carer/Guardian with legal responsibility consent		Childcare Provider confirmation	
Signed		Signed	
Print name		Print name	
Relationship to child		Job Role	
Date		Date	