



Paste child's  
passport  
size  
photograph

## REGISTRATION FORM (A)

How did you hear about Royal Kids Nursery? \_\_\_\_\_

**Child First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Middle Name** \_\_\_\_\_

**Nick Name:** \_\_\_\_\_

Age: Yrs \_\_\_\_\_ Months \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: Male / Female

DD MM Year

Nationality \_\_\_\_\_

Place of Birth: \_\_\_\_\_

Religion \_\_\_\_\_

### **Qatar ID Details:**

Child ID Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_

Mother tongue language: \_\_\_\_\_

Other languages: \_\_\_\_\_

Start Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Signature of Parent/Guardian**

*Office Use Only*

Class \_\_\_\_\_

Child No \_\_\_\_\_



## PARENTS INFORMATION FORM (B)

Details	Mother	Father
Full Name		
Nationality		
Home Telephone		
Work Telephone		
Mobile		
Occupation		
Email Address		

### Siblings at RKN

Details	Name	Age
1		
2		
3		
4		
5		

### Emergency Contact Information

	Name	Relation to Child	Mobile Number
1			
2			

Additional Emergency Contact	
Name:	ID Number:
Relationship to Child:	
Mobile:	Home/Work Tel:
Name:	ID Number:
Relationship to Child:	
Mobile:	Home/Work Tel:



**Authorization for Pickup**

	<b>Name</b>	<b>ID Number</b>	<b>Mobile Number</b>
1			
2			

Please note: under NO circumstances is your child allowed to be released to a person who is not listed on this form. If there are any changes, please notify the Nursery in writing. Visitors entering the nursery are asked to provide their ID and sign in. If they are unfamiliar to us, we will call parents to confirm permission for pick up.

I do hereby authorize the RKN nursery to release my child to the above listed people in the event I am unable to pick him/her up myself. I release RKN from any and all responsibility for problems that may develop when such persons take my child from the premises.

Parent Signature \_\_\_\_\_

Date: \_\_\_\_\_

In an effort to maintain accurate and up to date information, please ensure that you notify Royal Kids Nursery immediately of any changes in your contact number.



## MEDICAL QUESTIONNAIRE (C)

### Medical History

1. Is your child under medical care: YES  No
2. Does your child have any ongoing health concerns? \_\_\_\_\_
3. Is your child taking any medication? If so, what kind? For What? \_\_\_\_\_  
\_\_\_\_\_
4. Does your child have any heart problems, breathing problems, or other Medical/physical problems our instructors should be aware of? \_\_\_\_\_  
\_\_\_\_\_
5. Has your child had Chicken Pox: YES  NO  age;
6. Has your child had Measles: YES  NO  age;
7. Does your child have any Allergies? \_\_\_\_\_
8. Does your child suffer from Febrile Convulsions? YES  NO
9. Does your child suffer from Asthma? YES  NO
10. Do you know the cause of Allergy? \_\_\_\_\_
11. Do you have a treatment / response plan in place? \_\_\_\_\_

Additional information and Notes

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All information provided is confidential.



Please note that if your child falls ill at nursey, you will be contacted and asked to pick up your child immediately. If you cannot be reached within one hour, we will call one of your emergency contacts.

Your child may return to nursery when they are symptom free for minimum 24 hours or has been on antibiotics for the appropriate time as determined by your child's paediatrician. If your child has been seen by a doctor and is told that they may return to school sooner than 24 hours, please provide a note from the doctor.

**If your child has been off with a contagious and infectious disease such as chicken pox, hand, foot and mouth, measles, conjunctivitis (pink eye) etc you must bring a doctors certificate in, or will be asked to take your child home again.**

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## MEDICAL CONSENT FORM (D)

The following document is a consent and agreement between Royal Kids Nursery and parent, to administer first aid, emergency care procedure and medical examination by a registered doctor for your child while in our care. **In case of emergency, the paramedics will be called before the parents.**

I give consent for my child to receive the following from Royal Kids Nursery while in their care

1. Use of topical creams as required
2. To administer of Pandol (for Fever) prior to parents arriving to collect the child
3. Provide first aid as necessary and emergency medical treatment if required.
4. An annual examination by RKN consulting doctor

Fever medication in the event that your child develops a fever while at Nursery RKN nurse will contact you. With your consent we will administer Panadol syrup for pain / fever relief. All details of when and how much will be recorded. You will be asked to immediately come to collect your child. Your child will be kept comfortable with nurse until you arrive. Parent will be contacted by phone prior to administration, however the Nurse may have to administer medication without prior verbal consent if we are unable to contact you.

Emergency treatment in the event that your child requires emergency treatment, you will be contacted and asked you to collect your child from nursery. If the nursery is unable to contact you, an ambulance will be called to take your child to hospital for diagnosis and treatment. RKN will continue its efforts to contact you meanwhile. RKN will not risk to use any of its staff vehicles to take your child to doctor. We will make every effort for a staff member known the child to travel in the ambulance with your child and stay with them until you arrive.

*Please kindly note, our on site Health Care Practitioner has the right to over rule your own doctor if they feel your child is too sick to attend the nursery.*

Child Name: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_



## PHOTOGRAPHY POLICY and CONSENT FORM (E)

Photographs will only be taken with the Royal Kids Nursery digital camera, no RKN staff members is allowed to take photos on their own personal phones. Staff mobile phones are not allowed to be used or answered during sessions.

If Parents does not give permission for their child to be photographed, all staff will be informed so that all reasonable steps can be taken to ensure that the child is not included in any photographs.

No photos will be used in any way (such as on a brochure, for newspaper publication, on our website, or Facebook page) without specific permission from the parents at the time of publication.

We may use photographs of the children in a variety of media outlets. Kindly mark whether you AGREE or DISAGREE for the same.

I AGREE and give consent to use my child's photographs at RKN media

I DISAGREE and do not give consent to use my child's photographs in any media outlets.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## OPTIONAL LESSONS FORM (F)

As part of our lessons, we offer optional, Arabic, Qu'ran and French lessons. If you would like your child to participate in any of these lessons please circle the appropriate answers.

1. Arabic
2. Qu'ran
3. French





## Document Checklist

### Forms

### Completed

REGISTRATION FORM (A)	
PARENTS INFORMATION FORM (B)	
MEDICAL QUESTIONNAIRE (C)	
MEDICAL CONSENT FORM (D)	
PHOTOGRAPHY POLICY and CONSENT FORM (E)	
OPTIONAL LESSONS FORM (F)	
FEES POLICY (G)	

### Official Documents

### Completed

Child birth certificate	
Copy of Child Passport	
Copy of Child ID	
Copy of Father Passport	
Copy of Father ID	
Copy of Mothers Passport	
Copy of Mathers ID	
Copy of Vaccination Record	
2 x Passport Photographs	
Passport photo or ID of all carers who will collect child	