BROMLEY EARLY YEARS PARENT CONTRACT



This form **must** be completed <u>before</u> your child accesses funded childcare.

ALL Early Years providers are required by law to keep a record of children's details who are claiming the Funded Entitlement.

Completing this form and providing a copy of your child's Birth Certificate is a condition of your child receiving funding with this provider.

Parent Contracts must be kept for 7 years and made available for audit purposes.

CHILD DETAILS										
Legal First Name:					Date of Birth:	ate of Birth:				
Legal Middle Name/s:					Gender:					
Legal Surname:					Home Address &					
Preferred Surname:					Postcode:					
My child receives Disability Living Allowance: YES NO I would like this provider to claim DAF* for my child: YES								NO		
CHILD'S ETHNICITY The information below is a statutory requirement from the Department of Education (DfE) and assists the local authority to compile statistics on early education from different ethnic backgrounds. This is optional but helps to ensure all children have an opportunity to access funded early education to fulfil their potential. If you do not wish to give these details, please tick the 'Refused' box. NOTE: These categories are provided by the DfE**										
White or White British	Bla	Black or Black British			Mixed/[Dual Backgrour	nd	Asian or Asian British		
Chinese	Re	fused			Any Otl	ther Ethnic Group				
PARENT/CARER DETAILS										
Title:					Title:	Title:				
Legal First Name:				Legal F	irst Name:					
Legal Surname:				Legal S	Surname:					
Date of Birth:				Date of	Date of Birth:					
NINO or NASS***:				NINO d	INO or NASS***:					
Email Address:				Email A	nail Address:					
*The Disability Access Fund (DAF) is designed to support children with disabilities or special educational needs and is paid directly to the provider to help them make reasonable adjustments to their setting. More details can be found at www.bromley.gov.uk/help-childcare-costs **DIR ethnicity codes can be found at: www.gov.uk/guidance/complete-the-school-census/find-a-school-census-code ***NINO = National Insurance Number. NASS = National Asylum Support Service Number. By giving these details you agree that your provider can check eligibility for Under 2YC Working, Together for 2s, 2YO Working, 3&4YO Extended, and EYPP. More details can be found at: www.bromley.gov.uk/childcare .										
FUNDED ENTITLEMENT HOURS										
Provider Name:	Provider Postcode:									
Funding Start Date:										
I would like to claim the	the funded entitlement over:				weeks of the academic year. 38 is term time / 39-52 is stretched					
Together for 2s code:	EY2_SENT				Working Eligibility code: HMRC					
PATTERN OF ATTENDANCE	Booked Hours	Unde Worl	r 2YO king*			2YO Workir		3&4YO Universal	3&4' Exten	
Monday										
Tuesday										
Wednesday										
Thursday										
Friday										
TOTAL										

NOTICE TO LEAVE

You are not obliged to give notice for the funded hours however, we respectfully ask that you give as much notice as possible whilst							
also paying due regard to the provider's notice period for non-funded hours.							
DECLARATION							
I declare that my child does does not attend another setting. Please state where and the number of funded hours they access:							
Provider Nar	e: Term time Stretched Hours:						
I agree to notify this early years provider of any changes in my child's circumstances							
I understand that I can claim up to 570 hours or 1140 hours if I meet the eligibility criteria, per academic year							
I understand my child could lose their funded entitlement if they do not attend regularly without a reason for their absence							
I declare that my child receives no funded education other than stated above (including other Local Authorities)							
I agree that this provider can contact my previous or other providers (if this applies)							
I will endeavour to give this provider as much notice as possible for funded hours							
I give permission to this provider and LBB to retain copies of necessary documents relating to my child's funded entitlement							
I understand that I should keep a copy of this completed and signed Parent Contract							
I have read this provider's Admission Policy for funded entitlement and understand the terms							
IMPORTANT - DATA PROTECTION CONSENT							
Your signature on this form is your explicit consent for the Early Years Provider and Local Authority to process personal data relating to you and your child in accordance with the Data Protection Act and UK General Data Protection Regulation. The information given will be entered onto a computer database and held by the London Borough of Bromley. Personal data will only be shared as is necessary and always in a fair and lawful manner. The personal data and information provided will be shared with other agencies as per the above statement and any Privacy Notice supplied by your provider and only kept for as long as necessary. For more details visit www.bromley.gov.uk/PupilPrivacyNotice							
PARENT/CARER PROVIDER							
I declare that the information I have supplied is correct to the best of my knowledge at the time of completion							
Print Name:		Print Name:			_		
Signature:		Signature:					
Date:		Date:					

AMENDMENTS TO THE CHILD'S FUNDED ENTITLEMENT HOURS WITHIN A YEAR OF SIGNING THE ORIGINAL CONTRACT								
Funding Start Date:	g Start Date:			Eligibility code:				
I would like to claim:	BOOKED	U2YOW*	TF2s*	2YOW*	3&4YO UNI	3&4YO EXT*		
MONDAY								
TUESDAY								
WEDNESDAY								
THURSDAY								
FRIDAY								
TOTAL								

	PARENT/CARER		PROVIDER				
I declare the information I have supplied is correct to the best of my knowledge at the time of completion							
Print Name:		Print Name:					
Signature:		Signature:					
Date:		Date:					

*<u>eligibility code required</u>
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