**PARENTAL AGREEMENT**

**ACADEMIC YEAR 2025/2026**

**What’s the purpose of this document?**

* All parents/carers of children who attend Pickhill Pre-School are required to complete this parental agreement. It ensures that we can contact parents/carers in times of emergency.
* It also enables us to claim your government childcare funding on your behalf and to use your personal data. The information provided on this form will be retained for 6 years.
* This document also provides a contractual agreement between Pickhill Pre-School and the parent(s)/carer(s) of the child listed on page 3. Pickhill Pre-School agrees to provide the childcare listed on page 6 of this document.
* Please note that Pickhill Pre-School will need to see your child’s birth certificate or passport as proof of your child’s date of birth before this parental agreement will be signed and authorised.

**What am I entitled to?**

* All three- and four-year-olds are entitled to a free part-time nursery education place regardless of how much their families earn. The free places are for 15 hours a week, 38 weeks a year. Parents/carers don’t need to apply for this.
* Eligible working parents with children aged over 9 months will be entitled to up to 30 hours of Government funded childcare from September 2025. To find out more about whether you are eligible, visit <https://www.childcarechoices.gov.uk/>.
* Please note that a child attending a maintained school reception class will not be eligible for early years government funding.

**When is my child eligible for a funded place?**

|  |  |
| --- | --- |
| **Child’s birthday** | **When you can claim** |
| 1 January to 31 March | The beginning of the school term (summer) on or after 1 April |
| 1 April to 31 August | The beginning of the school term (autumn) on or after 1 September |
| 1 September to 31 December | The beginning of the school term (spring) on or after 1 January |

**Section 1 – Details of Child**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Legal Forename** | |  | | **Legal Surname** | |  | |
| **Middle Name** | |  | | **Preferred Surname** | |  | |
| **Address, including postcode** | |  | | | | | |
| **Date of Birth** | |  | | **Gender** | |  | |
| **Ethnic Background**  A response to this question is required, however if you do not wish to provide the information, please tick the appropriate box. | | | | | | | |
| **White** | White British | |  | **Asian or Asian British** | Indian | |  |
| White Irish | |  | Pakistani | |  |
| White Traveller of Irish Heritage | |  | Bangladeshi | |  |
| White Gypsy/Roma | |  | Any other Asian background | |  |
| Any other White Background | |  | **Mixed** | White and Black Caribbean | |  |
| **Black or Black Caribbean** | Caribbean | |  | White and Black African | |  |
| African | |  | White and Asian | |  |
| Any other Black background | |  | Any other mixed background | |  |
| **Other Background** | Chinese | |  | **I do not wish an ethnic background to be recorded.** | | |  |
| Any other ethnic background | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Please tick one of these 3 options. | | | | | |
| Child is not in the care of a Local Authority. |  | Child is currently in the care of a Local Authority. |  | Child has been in the care of a Local Authority. |  |
| LA Name: | | LA Name: | |

**Section 2 – Details of Parent(s)/Carer(s) with Parental Responsibility and their Funding Eligibility**

* The table below must be completed to provide us with emergency contact details and to enable us to check and claim, if applicable, for the correct funding.
* **Working Family Eligibility Codes** can only be checked usingthe parent/carer’s details who created the childcare services account on the government website.
* **Early Years Pupil Premium (EYPP)** economic checks can only be made using the parent/carer details of the person named on a Tax Credit Award Form or Letter from the Department for Work and Pensions. Evidence may be required for Looked After Children or children who have left care.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Parent/Carer 1**  *These details will be used first to make contact in an emergency.* | **Parent/Carer 2** | |
| **Title (Mr, Mrs, Dr etc.)** |  |  | |
| **First Name** |  |  | |
| **Surname** |  |  | |
| **Address** |  |  | |
| **Home telephone** |  |  | |
| **Work telephone** |  |  | |
| **Mobile telephone** |  |  | |
| **Date of Birth**  *(Please provide this to allow checks to be made by school for EYPP.)* |  |  | |
| **National Insurance or NASS Number** |  |  | |
| **Working Family Eligibility 11-digit code, if eligible.** |  | | |
| **Disability Living Allowance (DLA) and Disability Access Funding (DAF)**  Funded children who are in receipt of DLA and are receiving the funding entitlement are eligible for the DAF. The DAF is a fixed annual rate of £938 per eligible child, and paid annually to the child’s nominated early years childcare | | | |
| **Is your child eligible and in receipt of DLA?** (Yes/No) | | |  |
| **If your child is eligible and in receipt of DLA, would you like us to claim for the DAF?** (Yes/No) | | |  |

The Early Years Pupil Premium (EYPP) is additional funding provided by the government to early years settings, such as nurseries and childminders, to support the development and learning of some children by providing extra resources to support their early education. To qualify for EYPP, a child must be attending early years childcare and their family must meet certain criteria, such as being eligible for free school meals, being looked after by the local authority, or being adopted from care. By completing this Parental Agreement, you are giving your permission for checks to be made using your NI/NASS number, DOB and surname. Where EYPP is allocated to children who are in local authority care or have been adopted, childcare providers will have access to the reason for the EYPP allocation. If additional funding is allocated, we will discuss with you how it will be used to enhance your child’s development.

**Section 3 – Details of funded hours claimed at another provider**

If you are utilising your funded government childcare hours across another provider, please explain their attendance pattern, including any out of term-time holiday provision.

It is essential that you notify all childcare providers, making it clear how many funded hours should be claimed at each provider.

|  |  |
| --- | --- |
| **I do not use another childcare provider.**  *(Please tick this box or complete the table below.)* |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name of second Provider** |  | | | | | |
| **Enter number of weekly hours for second Provider** | **Mon** | **Tues** | **Weds** | **Thurs** | **Fri** | **Total** |
| **Universal 3 & 4-year-old funded hours** |  |  |  |  |  |  |
| **Working Family Expanded hours (if eligible)** |  |  |  |  |  |  |
| **Total funded hours** |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **I only use this provider during term time.** (Yes/No) |  |
| **I use this provider outside term time.** (Yes/No)  *(Please explain your use of this provider in the box provided.)* |  |

**Section 4 – Please complete only if you think that you would like your hours to change as the academic year progresses.**

As your child gets older and circumstances change at home, some families like the flexibility to being able to change their contracted hours across the academic year. Whilst we aren’t able to do this on a regular basis, we do allow occasional and termly changes. This is due to the amount of administration it takes to make the changes and the impact that changes can make on staffing, as we are required by law to have certain ratios of staff to children at all times. If you would like to take advantage of this flexibility, please explain how you envisage your child’s hours changing during the academic year.

**Section 5 – Confirmation of hours offered to pupil and agreement of weekly fees to be paid by Parent(s)/Carer(s)**

**Sessions at Pickhill Pre-School**

|  |  |
| --- | --- |
| Before School Session | 7.30am until 8.45am |
| Morning Session | 8.45am until 11.45am |
| Lunchtime Session | 11.45am until 12.30pm |
| Afternoon Session | 12.30pm until 3.30pm |
| After School Session | 3.30pm until 6.00pm |

**The following hours have been allocated to your child.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **No of hours** | **1¼** | **3** | **¾** | **3** | **2½** | **10½\*** |
| **Session** | **Before School Session** | **Morning Session** | **Lunchtime Session** | **Afternoon Session** | **After School Session** | **Total**  **Daily Hours** |
| **Monday** |  |  |  |  |  |  |
| **Tuesday** |  |  |  |  |  |  |
| **Wednesday** |  |  |  |  |  |  |
| **Thursday** |  |  |  |  |  |  |
| **Friday** |  |  |  |  |  |  |
|  |  |  |  | **Total Hours** | |  |
|  |  |  |  | **Total Funded Hours** | |  |
|  |  |  |  | **Hours to Pay** | |  |

\*Please note that a maximum of 10 hours can be claimed for per day.

**Weekly cost of childcare**

Pickhill Pre-School makes the following charges for each hour of childcare provided above the allocated funded hours.

|  |  |
| --- | --- |
| For 3 and 4-year-old children | £6 per hour |

Therefore, weekly charges based on the above allocation for your child is as follows:

|  |  |  |
| --- | --- | --- |
| **Number of non-funded hours (A)** | **Hourly charge for non-funded childcare (B)** | **Weekly charge for childcare (AxB)** |
|  | **£6** |  |

**Section 6 – Parental Declaration**

* I confirm that the details stated on this form are correct.
* I confirm that my child is not attending a reception class in a maintained/academy school.
* I accept that I must discuss any change in my child’s funded hours during a term with all Early Years childcare providers that my child attends.
* I understand that I cannot claim my entitlement across more than 2 sites in one day.
* I understand that I cannot claim more than the weekly maximum of up to 30 funded hours.
* I understand that my funded hours cannot exceed 10 hours per day and can be accessed between 6am – 8pm depending on the operating hours of my chosen childcare provider.
* I authorise Pickhill Pre-School to validate the Working Family eligibility code, if provided.
* I understand that if I cease to meet the Working Family eligibility criteria, I will continue to receive expanded entitlement for the “grace period” only at my current provider.
* I authorise North Yorkshire Council to exchange information I have provided with my child’s providers, other local authorities if my address is outside of North Yorkshire and the Department for Education.
* I authorise North Yorkshire Council to exchange information about my child’s take-up of the entitlement.
* I understand that any additional hours used by my child outside the funded allocation are chargeable and I am liable for these costs.

|  |  |  |  |
| --- | --- | --- | --- |
| **I confirm that I have read and agree to all points in the declaration above.** | | | |
| **Parent/Carer Signature:** |  | **Date:** |  |
| **Print Name:** |  | | |
| **Provider: I confirm I have checked evidence of child’s date of birth, and provided details of the government funding offered at this provider** | | | |
| **Provider Signature:** |  | **Date:** |  |
| **Print Name:** |  | | |
| **Job role:** |  | | |
| **Documentary proof of child’s DoB Type (e.g., birth certificate, Passport):** |  | | |