

Nursery Registration Form

Surname: _____

First Name: _____

Male / Female: _____

Home Address: _____

_____ Postcode: _____

Date of Birth: _____

Nationality: _____ Religion: _____

Brother(s) and Sister(s): _____

At the Nursery: Yes / No

Day	
Mon	
Tue	
Wed	
Thu	
Fri	

Sessions
Full Day
School Day
Short Morning
Long Morning
Breakfast
Afternoon

Mother: Father: (Primary care provider)

Name: _____

Home Tel: _____

Mobile Tel: _____

Email: _____

Occupation: _____

Company: _____

Father's or Mother's address if different from above:

_____ Postcode: _____

Telephone: _____

Entry Date I would like my child will start at Stars Nursery

BOTH FATHER AND MOTHER (AND WHERE APPROPRIATE GUARDIANS)

SHOULD READ AND SIGN THE DECLARATION BELOW

DECLARATION: I have read the Nursery Standard Terms and Conditions and the current Fee Schedule and undertake to conform to all the Rules and Regulations of The Nursery from time to time in force. I also undertake to pay fees monthly in advance and to provide one month written notice to terminate my childcare contract.

I enclose the Registration Fee of £80 please make cheque payable to Stars Nursery Southgate Ltd.

Signature of Father or Guardian: _____ Date: _____

Signature of Mother or Guardian: _____ Date: _____