

Childs Details									
Forenames:									
Surname:									
Address:									
Postcode:	Date of Birth:	(Please provide a due date for unborn child)							
Gender: Male / Female									
Child's Spoken / Written Language:									
Does your child have any special care requirements (e.g. allergies, disabilities, special physical conditions)? Yes / No If yes, please describe in detail									
Does your child attend another setting? If yes, please include contact detail here:	/es / No								
Parent/Guardian 1									
Full Name									
Relationship to Child									
Home Address									
Home Telephone / Personal Mobile									
Personal Email									
Company Name/Work Address									
Work Telephone / Mobile									
Work Email									
Do you have parental responsibility for the named child?	Yes / No								
Parent/Guardian 2									
Full Name									
Relationship to Child									
Home Address									
Home Telephone / Personal Mobile									
Personal Email									
Company Name/Work Address									
Work Telephone / Mobile									
Work Email									
Do you have parental responsibility for the named child?	Yes / No								





Registration Form (continued)

	Emergenc	Emergency Contact 1				Contact 2		
Full Name								
Relationship to Child								
Home Address								
Home Telephone / Personal Mobile								
Personal Email								
Work Address								
Work Telephone / Mobile								
Work Email								
Password*								
Name of Nursery	St	Start Date						
Preferred Sessions		Monday	Tuesday	We	dnesday	Thursday	Friday	
Full Day Sessions								
Morning Sessions (if offered)								
Afternoon Sessions (if offered)								
How did you hear about the nursery?								
By signing this Registration Form you he following: You have read the privacy notice is								
· You agree that you have parental	responsibility	for the named	child.					
 You will at all times abide by all re Nursery), as amended from time 	elevant Nursery to time.	policies and p	rocedures (wh	ich are	e available	upon request	from the	
· You have read the Parent Agreem								
 You agree to pay your monthly fe your child attendance and your sp 			our sessions. F	ailure	to do so v	vill result in sus	spension of	
We take safeguarding very seriou	ısly and we will	report any cor	cerns to the lo	cal au	thority.			
Signature of Parent/Legal Guardian				Date				
Signature of Parent/Legal Guardian					Date			

