



REGISTRATION FORM

Surname

First Names
(Please underline known name)

Date of Birth

Name of Parents

Address.....

..... Post Code

Telephone No. Home Mobile

E-mail

Please indicate the sessions you would like by ticking the relevant boxes

	Monday	Tuesday	Wednesday	Thursday	Friday
8am-6pm					
8am-1pm					
1pm-6pm					
9am-4pm (3yrs+ only)					

It may be possible to extend morning sessions if necessary.

Required start date Would you be willing to accept alternative sessions? Yes/No

Please indicate here if your child has any special needs or disabilities

.....
.....

I consent to the processing of personal data under the Data Protection Act for nursery purposes only.

Parent Signature Date:

A Registration Fee of £30 should be sent with this form. Please make cheques payable to Egg Childcare Ltd

For our own records, how did you hear of the nursery?