



OFFICE USE ONLY

Qualified / not qualified for free 15 hours
 Date received(Date)
 Reg fee Applicable (£50)
 Deposit Applicable(£100/£200)
 Birth Certificate seen(Copy taken)
 Parents proof of address.....(Copy taken)

OFFICE USE ONLY

Start Date:
 Settling In Date:

Mayfair Day Nursery Registration Form

Details about your child

Forename..... Surname..... Boy/Girl
 Name child is known as (if different from above)..... Date Birth/...../.....
 Home Address
 Postcode.....

Contact Details

Home Telephone number

Mother's Name **Mobile Number**.....

Occupation..... NI Number..... Date of birth...../...../..... **Daytime Number**.....

Date of Birth ____/____/____

Email Address.....

Father's Name **Mobile Number**.....

Occupation..... NI Number..... Date of birth...../...../..... **Daytime Number**.....

Date of Birth ____/____/____

Email Address.....

Custody Arrangements.

Are there any access or custody arrangements we need to be aware of? Please complete the section below or alternatively speak to any senior member of staff. All information will be treated with the utmost confidentiality.

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Additional Contacts

Please give names of other people who may collect your child or be contacted in an emergency; please also give your security password to identify anyone who collects your child and is not known to staff.

Security Password:

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1. Name..... Relationship to child..... Tel no

2. Name..... Relationship to child..... Tel no

3. Name..... Relationship to child..... Tel no

Doctors Name: Dr..... Surgery Name..... Tel no

Health Visitors Name..... Tel no

