

Children First Nurseries Ltd

www.children-first.info

Queens Pre School Day Nursery Queens Baby Nursery Independent Place Nursery

ENROLMENT FORM

Full Name.....Date of birth.....

Address.....

Home Telephone Number.....

Parent's full name.....Title.....

Parent's daytime number and ext.....Title.....

Parent's mobile.....

Parent's day time e mail address.....

Parent's daytime address.....

Parent's full name

Parent's daytime number and ext.....

Parent's mobile number.....

Parent's e day time e mail address.....

Parent's daytime address.....

ATTENDANCE REQUIREMENTS

Please indicate full day, morning or afternoons:

MONDAY.....

TUESDAY.....

WEDNESDAY.....

THURSDAY.....

FRIDAY.....

Please indicate second choice sessions.....

Preferred start date:

Earliest start date:.....Latest start date:.....

PHOTOGRAPHS OF PARENTS.

PHOTO

PHOTO

AUTHORISED PEOPLE WHO MAY COLLECT YOUR CHILD.

We will only release your child into the care of another person if you have informed us, their details and photographs are attached and they use the password.

Name

Relationship

Phone number.....

Mobile phone number.....

PHOTO

PHOTO

