



Heath House Day Nursery
 52 Fleet Road
 Fleet
 Hampshire
 GU51 4PA
 Tel: 01252 617473

REGISTRATION FORM

Personal Details:

Child's Surname:		First Names:	
Date of Birth:		Boy:	Girl:
Mothers Name:		Fathers Name:	
Contact Address:		Postcode:	
Home Telephone:			
Mother's Work Tel:		Father's Work Tel:	
Mother's Mobile:		Father's Mobile:	
Mother's email:		Father's email:	

Attendance Required:

I would like my child to attend from:

Please tick the boxes for the sessions you would like below:

	Mon	Tue	Wed	Thu	Fri
Full Day					
Morning					
Afternoon					

I/we have read and agree with the Terms and Conditions, and understand that from time to time it may necessary to amend them, that we will be bound by any such ammendments, and that the terms and conditions at any time are displayed and available at the nursery.

I / we would like to register for a place at Heath House Day Nursery.

I / we enclose the non refundable registration fee of £80.00 (Cheques payable to "Heath House Day Nursery " please).

Signature _____ **Name** _____ **Date** _____

For Office Use Only		
Registration Fee:		Date:
Place Offered:		Date:
First Months Fees:		Date:
Enrolment Form:		Date:
Mobile Phone Logged:		Date:
Email Address Logged		Date: