

**MARSHBROOK FIRST SCHOOL
MARSHMALLOWS NURSERY**

Registration Form

Please be aware that completion of this form does not guarantee a place. We will write to you to confirm the hours we can offer. **We will need a copy of your child's birth certificate and a £35 deposit before registration can be completed.** The deposit is to reserve your child's place and will be refunded at the end of their first term. If having paid a deposit, you do not take up the offered place your deposit will only be refunded if and when we are able to fill that place.

Surname of Child: **Forename:**

Middle Name(s): **Chosen Name:**

Date of Birth : **Gender (F/M)**

Address:

..... **Post Code:**

Home Telephone No. **Mobile**

Main e-mail address:

Please tick to indicate which sessions you would like your child to attend

Preferred Start Date: _____

	Morning	Lunchtime	Afternoon
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Signature(s) : **Print :** (Mr.Mrs.Miss.Ms)
(Parent/Guardian)

I confirm that I have read and agree to the terms and conditions outlined in the information booklet.

Charges are subject to change.

<p><u>For Office Use Only:</u> Deposit Received (Date Stamp):</p>
--