



the Willow

REGISTRATION FORM

Child's Full Name: _____

Date of Birth: _____

Male/Female: _____

Term of Entry: Autumn 20____/Spring 20____ Age at Entry: _____year _____months

Parent's Details:

Father

Mother

Title:		
Full Name:		
Home Address:		
Home Telephone:		
Mobile:		
Email Address:		
Occupation:		
Nationality:		
Religion:		
How did you hear about us?		

Child's Medical Background e.g. asthma _____

Any Other Helpful Information (special needs etc.) _____

Please return this form to our secretary, Amanda Hunt, informing us how you have paid the registration fee of £75. BACS details are A/c: 00158920 Sort Code: 30 94 81. **Please put your child's name as a reference.** A letter confirming your Registration will follow and we will be in touch to offer places prior to your start at The Willow.

I have enclosed a cheque for £75 made payable to "**The Willow Nursery School Ltd.**"

I have paid by BACS on (date): _____

For Office Use Only. Date Registered:		
Deposit Paid:		
Acceptance:		