



Acorns Nursery School

Shackleford Village Hall
Shackleford, Surrey GU8 6AE
Registered Charity Number 1028177

Contact : 01483 860 723 (during opening hours) and 07900 543 759 8am - 5pm weekdays.

REGISTRATION FORM

Name and Contact Details

Child's full name:

Date of birth:

Address:

..... Postcode:

Home Telephone:

Parents' Names:

Mob numbers:.....

Email addresses:.....

Other Information

Child's first language.....Other languages spoken at home.....

Special requests/requirements about religious observance, food, clothing, health or other matters which we should observe.....

Has your child any on-going health problems?.....

Term / Half Term you wish your child to start with us:.....

Please complete this form and return it with a £20.00 Registration Fee. If we are able to offer your child a place a £50.00 confirmation of acceptance fee is charged. Visits will be arranged to suit you during the half term before your child starts. If we reserve a place for you and you decide not to take it up please give us at least half a term's notice - if you do not do so half a term's fees will be payable. The £50.00 confirmation of acceptance fee is refunded to you if your child remains at Acorns until first school entry.

If you have downloaded this form from our website please telephone us to check availability of places before you send us a completed form.

Please phone Cary Dale or call into the Nursery if you wish to discuss anything or check details.

Please reserve a place for my child at Acorns. I enclose a cheque (payable to Acorns Nursery School)/ cash for £20 now as a registration fee. I accept the terms and conditions outlined in the registration form.

Signed :.....Date:.....

Please Print Name:.....Name of Child:.....