



Registration Form

Child's Surname:..... GENDER

First Name:.....Date of Birth:

Address:

.....Postcode:

		PARENT / GUARDIAN DETAILS		PARENT / GUARDIAN DETAILS		
FULL NAME						
DAYTIME TEL No.						
MOBILE No.						
EMAIL ADDRESS						
Sessions		MON	TUES	WED	THURS	FRI
EARLY CLUB	08:30 - 09:15					
30 HOURS	09:00 - 15:00					
ALL DAY	09:15 - 15:45					
MORNING	09:15 - 12:15					
LUNCH	12:15 - 12:45					
AFTERNOON	13:00 - 15:45					
SCHOOL PICK	15:00 - 15:45					
AFTER SCHOOL	15:00 -16:30					
FOREST	AM/PM					
PREFERRED DATE OF ENTRY*			SIZE T-SHIRT AGE: PURPLE OR GREY 2-3 3-4 4-5			
PREFERRED CHOICE OF SCHOOL FOLLOWING CLARE'S LITTLE BEARS						

*All boxes must be completed

Brothers and Sisters Ages:..... Free funding 15 or 30 hours? (if eligible).....

How did you hear about us? :

Signature of Parent / Guardian:..... Date:

REGISTRATION FEE - A Non-Refundable fee of £145 must be enclosed with this form (includes a T-shirt/book bag)

To pay fee by bank transfer - Lloyds Bank PLC Sort Code: 30-96-26 Account Number: 57069260 Reference: child's name

OFFICE USE ONLY: Date Registration Fee Received:.....