



# Ambourne House Day Nursery

## Registration Form

### Personal Details

Child's Full Name		Boy/Girl
Date of birth	Religion	
Address		
Password		
Postcode	Home telephone	
Email for general communications		
Email for invoicing (if different)		
Father's Name	Mobile	
Mother's Name	Mobile	

I wish to reserve a place for my child at your nursery to commence on: \_\_\_\_\_

### Attendance Schedule (Please indicate exact session time)

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Full/Short Day					

**Please note this registration form incorporates the Terms & Conditions, a copy of which is included in the Prospectus. Upon signing this form and applying to register your child at Ambourne House Day Nursery, you are agreeing to abide by those Terms & Conditions.**

Signature (Parent one)		Signature (Parent two)			
Date		Date			
For office use only					
Reg and Dep Fee	First visit booked	E Form and P Form	Abacus Info/Invoice	Email Abacus	Email Contacts

**Data Protection:** In compliance with current UK Data Protection legislation, any information you provide here will be kept secure and treated confidentially. The data collected will only be used by Ambourne House Ltd and will not be disclosed to any other sources, without your prior consent.