

# Lower Covey Montessori Nursery

Chapel Lane, Yetminster, Sherborne, Dorset, DT9 6LJ  
01935 488215 info@lowercovey.co.uk



## CHILD ENROLMENT FORM

### YOUR CHILD:

FULL NAME: \_\_\_\_\_ M / F

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

LANGUAGE: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

RELIGION: \_\_\_\_\_ ETHNICITY: \_\_\_\_\_

### HEALTH DETAILS ABOUT YOUR CHILD:

ALLERGIES: \_\_\_\_\_ DIETARY CONSIDERATIONS: \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

VACCINATIONS RECEIVED: \_\_\_\_\_ TOLERATES PENICILLIN: Y / N / UNKNOWN

DOCTOR NAME: \_\_\_\_\_ DOCTOR TELEPHONE: \_\_\_\_\_

DOCTOR ADDRESS: \_\_\_\_\_

HEALTH VISITOR NAME: \_\_\_\_\_

### DETAILS ABOUT PARENT/CARER 1:

PARENT / CARER NAME: \_\_\_\_\_ RELATIONSHIP TO CHILD: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ NATIONAL INSURANCE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ WORK CONTACT NUMBER: \_\_\_\_\_

### DETAILS ABOUT PARENT/CARER 2:

PARENT / CARER NAME: \_\_\_\_\_ RELATIONSHIP TO CHILD: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ NATIONAL INSURANCE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ MOBILE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ WORK CONTACT NUMBER: \_\_\_\_\_



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## GENERAL INFORMATION:

WHO DOES THE CHILD LIVE WITH?: PARENT/CARER 1 / PARENT/CARER 2 / BOTH

LANGUAGES SPOKEN AT HOME:

PEOPLE WHO MAY COLLECT MY CHILD FROM NURSERY (please arrange a password with your child's key worker on the day):

1 2 3

DOES YOUR CHILD FALL IN TO ANY OF THE FOLLOWING CATEGORIES (please circle as applicable):

ADOPTION ADOPTION PENDING FOSTERCARE SOCIAL CARE SPECIAL GUARDIANSHIP

## BILLING DETAILS (THE PERSON/S RESPONSIBLE FOR THE PAYMENT OF INVOICES):

NAME OF PERSON(S):

BILLING ADDRESS:

BILLING EMAIL:

TELEPHONE: MOBILE:

## SESSION BOOKING REQUIREMENTS:

I / WE WOULD LIKE TO BOOK SESSIONS FOR OUR CHILD TO COMMENCE ON

Please enter the session start and finish times as required into the spaces available below, for our nursery session times we advise you to refer to our 'Session and Fees List' or speak to a member of the administration team who will be happy to help:

	START	FINISH
MONDAY		
TUESDAY		
WEDNESDAY		
THURSDAY		
FRIDAY		

## ADDITIONAL DOCUMENTS THAT ARE REQUIRED TO COMPLETE YOUR CHILD'S ENROLMENT:

Please ensure you have read, signed and attached the following documents to this form before taking it to the nursery office for processing with the required Enrolment Fee and/or deposit: (YOUR CHILDS BIRTH CERTIFICATE is required for DOB confirmation)

- General Nursery Terms & Conditions, September 2018
- Nursery Finance Terms & Conditions, September 2018

### OFFICE USE ONLY:

Birth Certificate seen: \_\_\_Y \_\_\_N Date: Signed:

Enrolment Fee: £30 Date: Deposit Amount: Date:

Added on Family: Letter sent:

