



Rectory Lane Nursery School Application Form

Child's Name.....Date of Birth.....

Address.....Telephone

Ethnicity..... Home language.....

Email address.....

Family Doctor.....Telephone.....

Emergency Contact Number.....

Does your child have any special requirements such as allergies or illnesses we need to be aware of.....

You will need to bring your child's birth certificate when you visit us.

Preferred sessions (please tick boxes)

The sessions run from 9.15 to 12.15 Monday to Friday, term time only. Days are negotiable but we would expect a child to attend a minimum of two sessions per week.

Monday	Tuesday	Wednesday	Thursday	Friday
[]	[]	[]	[]	[]

Have you registered your child with a state nursery YES/NO?

If yes when do you anticipate a place being offered.....

Preferred date of entry to Rectory Lane Nursery School.....

Please place my child on the waiting list. I accept the following conditions

1. **I understand that six weeks written notice is required to the Manager**, of the departure of my child from the nursery at the end of the term and that failure to give this notice will render me liable for six week fees for the following term. This applies even if your child receives local authority funding.
2. I undertake to pay fees half termly in advance and understand that, if payment is outstanding for more than ten days my child could lose their place at the nursery. (This obviously does not apply to funded children).



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3. In the event of my child being injured in any way I authorise a qualified first aider to administer first aid in accordance with the nurseries first aid policy. To call an ambulance if deemed necessary and notify the parent or carer.

4. I agree to my child's photograph/video being taken to use in the nurseries developmental learning records and for our Nursery scrapbook.

5. Whilst every effort is made to ensure the safety of your child, individual members of staff cannot be held responsible for any accident attributable to attendance a Rectory Lane Nursery.

Parent/Carers signature.....

Date.....

Please return this form to

Mrs C Hodgson

Rectory Lane Nursery School

Easthampstead and Wildridings Community Centre

Rectory Lane

Bracknell

Rg12 7BH