|  |  |
| --- | --- |
| **To be complated by a member of staff** |  |
| Date form received | Date fee received | Name of staff member acknowledging receipt |
|  |  |  |

**Registration Form**

|  |  |
| --- | --- |
| **Child’s Details** | **Parent/ Gaurdian Details** |
| First Name |  | First Name |  |
| Surname |  | Surname |  |
| Date of Birth |  | Relation to child |  |
| Address |  | Mobile |  |
| Town |  | Tel |  |
| Postcode |  | E-mail |  |

|  |  |
| --- | --- |
| Details of siblings that have attended Meadow Nursery School |  |
| Does your child have any medical conditions? |  |
| Does your child have any special educational needs such as speech and language?  |  |

**REGISTRATION FEE**

I have enclosed a none refundable administration fee of £25 PAID CASH

Sort Code: **30-91-11 (Lloyds, Wokingham)** PAID ELECTRONIC

Account Number: **02399219**

Account Name: **Meadow Nursery School Parents’ Association**

Ref: Please ref your child’s name in the payment so we can link with your application form.

I have read and understood the Meadow Nursery Admissions Policy found on www.meadownurseryschool.org

**ACKNOWLEDGEMENT**Please note to keep costs down your acknowledgement slip will be emailed unless you have requested otherwise.

**If your child will need any special provisions please contact the nursery on registration, this will NOT affect your childs place, but will allow us to be best prepared for them.**