



## KENSINGTON

Email: [francescashort@tadpolesnursery.com](mailto:francescashort@tadpolesnursery.com)

### REGISTRATION FORM

**Fee: £ 205.00**

Date Form Filled In;

/ / (dd/mm/yy)

Date of Place Required:

SEPTEMBER 20\_\_\_\_\_

JANUARY 20\_\_\_\_\_

APRIL 20\_\_\_\_\_

\*Please tick start date and enter year of entrance

Surname:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Forename (s):

\_\_\_\_\_  
\_\_\_\_\_

Preferred nickname:

\_\_\_\_\_  
\_\_\_\_\_

Date of Birth:

/ / 20\_\_\_\_\_

Sex:

\_\_\_\_\_  
\_\_\_\_\_

Address:

Postcode: \_\_\_\_\_

Home Telephone Number:

\_\_\_\_\_

#### Parent's/Guardian's Information:

Parent 1 Name:

\_\_\_\_\_

Parent 1 Mobile Number:

\_\_\_\_\_

Parent 1 Email Address:

\_\_\_\_\_

Parent 1 Work Phone Number:

\_\_\_\_\_

Parent 2 Name:

\_\_\_\_\_

Parent 2 Mobile Number:

\_\_\_\_\_

Parent 2 Email Address:

\_\_\_\_\_

Parent 2 Work Phone Number:

\_\_\_\_\_

Contact Details of third responsible person:

\_\_\_\_\_

Has your child been registered at other nurseries?

\_\_\_\_\_

If Yes: Which Nurseries?

Nationality/ies:

\_\_\_\_\_

Languages Spoken at home:

\_\_\_\_\_

Religion/Belief:

\_\_\_\_\_

Does your child have any health problems, have they had any infectious diseases?

\_\_\_\_\_

Has your child been immunised?

\_\_\_\_\_

**FUNDING:** We offer a limited amount of fully funded places each year.

DO YOU REQUIRE A FULLY FUNDED PLACE at 2?

\_\_\_\_\_

DO YOU REQUIRE A FULLY FUNDED PLACE at 3?

\_\_\_\_\_

WILL YOU BE APPLYING FOR A BURSARY PLACE?

\_\_\_\_\_

**PLEASE PAY YOUR REGISTRATION FEE VIA BANK TRANSFER: £205.00**

#### OUR BANK DETAILS:

Bank Name: BARCLAYS

Account Number: 83588602

Sort Code: 20-70-15

IBAN: GB29 BUKB 20701583588602

SWIFTBIC: BUKBGB22

**THE REGISTRATION FEE of £205.00 IS NON-REFUNDABLE. IT IS NOT A DEPOSIT AND DOES NOT CONFIRM A DEFINITE PLACE AT THE SCHOOL.**