

Enrolment Form



Glassford
Day Nursery

To register your child for a place at Glassford Day Nursery, please complete the following:

Child's Full Name:

Date of birth:

Address:

Parent / carer's name:

Email address:

Home address

Post code:

Home telephone

Mobile:

Employer & Address:

Work telephone

Second Parent /carer's name

Email address

Home Address

Home telephone

Mobile:

Employer & Address

Work telephone

Alternative contacts that may collect your child, or be telephoned in an emergency
Name:

Relationship to child:

Tel no.

Mobile:

Name:

Relationship to child

Tel no.

Names of any brothers and sisters:

Doctor's Name: Address: Tel:									
Health Visitor: Address: Tel:									
Does your child have any special needs, food allergies or health considerations we should be made aware of? (Please come and talk to us if this would help)									
Immunisations/ Vaccinations:									
Diphtheria Whooping Cough Tetanus	<table border="0"> <thead> <tr> <th>Dates Given</th> <th>Dates Given</th> </tr> </thead> <tbody> <tr> <td></td> <td>Polio</td> </tr> <tr> <td></td> <td>Measles</td> </tr> <tr> <td></td> <td>MMR</td> </tr> </tbody> </table>	Dates Given	Dates Given		Polio		Measles		MMR
Dates Given	Dates Given								
	Polio								
	Measles								
	MMR								
Should any urgent matters of concern arise, I give permission for my child to be given emergency treatment as necessary and /or contact to be made with the appropriate medical /health/ social services authorities. YES or NO									
Signed	Date								
Signed	Date								
I give permission for my child to go on walks and outings during their time at nursery. YES or NO									
Signed	Date								

	7am – 8.00am	8am – 6pm	8am – 12 noon	12 noon to 1pm	1pm to 5pm	5pm – 7pm
	Breakfast included	Includes all meals, snacks and refreshments	Includes mid morning snack	Includes lunch	Includes snack	Includes tea
Monday	Early birds	Full Day	Morning Session	Lunch club	Afternoon Session	Evening Session
Tuesday	Early birds	Full Day	Morning Session	Lunch club	Afternoon Session	Evening Session
Wednesday	Early birds	Full Day	Morning Session	Lunch club	Afternoon Session	Evening Session
Thursday	Early birds	Full Day	Morning Session	Lunch club	Afternoon Session	Evening Session
Friday	Early birds	Full Day	Morning Session	Lunch club	Afternoon Session	Evening Session

preferred sessions (please circle)

How did you hear about our nursery?

I wish to apply for admission of the above named child at Glassford Day Nursery. I confirm that I have read and agree to abide by the terms and conditions of this information pack.

Signed: _____ Date: _____

Please return this form to:
 Janet Gibb, Glassford Day Nursery Ltd,
 2-4 Station Road, Glassford, South Lanarkshire, ML10 6WQ, with a £50.00 registration fee – cheque made payable to Glassford Day Nursery Ltd.
 (Please note this payment is non returnable should you cancel your place, but is deductible from your first months' fees.)

Please contact us should you have any questions or queries you would like to talk over. Our telephone number is 01357 523772
 Or contact us at enquiries@glassforddaynursery.co.uk
 Our web site address: Glassforddaynursery.co.uk

We look forward to welcoming you and your child to our nursery!