REGISTRATION FORM	(Office Use only)		eived:			
Please return this form to:		ROOM TO STOLL III				
Mrs Claire Taylor Jigsaw Ash Tree Farm Day Nursery Wrexham Road, Chester CH4 7QR						
PLEASE USE BLOCK CAPITALS						
Full Name of Child						
Date of birth	Date of birth Sex					
Address	Address					
	Post code Home Telephone number					
Child's first language	1	Religion				
2. Please tick times of attendo	ance which you re	equire:				
Day Full Day	Half	Day am	Half Day pm			
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
A date must be entered below 8 weeks' notice in writing is reagiven below. Requested starting date	quired. If notice is	not given you will l	oe charged from the date			

3.	Parent/Carer Full Name	Dr/Mr/Mrs/Miss/Ms
	Works TelephoneMobile Telephone	
	Employer's Name and address	
Pe	ersonal Email	
4.	Parent/Carer Full Name	Dr/Mr/Mrs/Miss/Ms
	Works TelephoneMobile Telephone	
	Employer's Name and Address	
Pe	ersonal Email	
5.	Name and Address of child's doctor	
	Telephone No	
6.	Does your child have any allergies, medical conditions or need for	
	Special care?	
7.	What immunisation has your child had to date?	
8.	Please indicate whether your child has any food or drink allergies or	
	Special dietary requirements	
9.	Is there anything else we should know about your child?	

PLEASE SIGN AND RETURN

Agreement/ Declaration

I enclose an administration fee of £50.00 which reserves a place for my child at Jigsaw Ash Tree Farm Day Nursery and which I understand is non-returnable after a place has been confirmed.

I agree to pay fees against an invoice for the first month, or part of a month, attended by my child; and thereafter monthly in advance, due on the first day of each calendar month.

I have read and understood the nursery information given by Jigsaw along with the registration form and I understand that refunds will not be made for periods of absence.

I undertake to give one month's notice in writing if I wish to change the date of which my child is due to start the nursery, if one month's notice is not given I will be charged from the date stated on my registration form.

I undertake to give one month's notice in writing when my child's place on any day is no longer required, and to pay fees for that month.

I have read and understood **all** policies and procedures including the Privacy Policy which states how all information provided by myself will be used and stored. I acknowledge and understand that on return of the registration form Jigsaw Day Nursery will hold personal details about me and my child.

I understand my rights outlined in the GPDR Privacy Policy and opt <u>in</u> For Jigsaw to store mine and my child's Personal data as outlined in the policy.

I accept all Jigsaw Curzon House Day Nursery's Policies, Procedures, Terms and conditions.

FullName	Signed	(Dr/Mrs/Ms/Mr/Miss)
Mother/Father/Guardian	Date	