



Sweet Peas Nursery Enrolment Form

Child's Details

First Name	<input type="text"/>	Date of Birth	<input type="text"/>
Middle Name	<input type="text"/>	Age	<input type="text"/>
Surname	<input type="text"/>	Gender	<input type="text"/>
Known As	<input type="text"/>	Religion/Ethnicity	<input type="text"/>

Emergency Contact Information

Collection Password	<input type="text"/>
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1st Emergency Contact

Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
Relationship to Child	<input type="text"/>
Home Telephone No.	<input type="text"/>
Mobile Telephone No.	<input type="text"/>

Parents Information

Primary Parent

Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
House No	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Town/City	<input type="text"/>
Postcode	<input type="text"/>
Home Telephone No.	<input type="text"/>
Mobile Telephone No.	<input type="text"/>
Work Telephone No.	<input type="text"/>
Email Address	<input type="text"/>
Work Place	<input type="text"/>

2nd Parent

Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
House No	<input type="text"/>
Address Line 1	<input type="text"/>
Address Line 2	<input type="text"/>
Town/City	<input type="text"/>
Postcode	<input type="text"/>
Home Telephone No.	<input type="text"/>
Mobile Telephone No.	<input type="text"/>
Work Telephone No.	<input type="text"/>
Email Address	<input type="text"/>
Work Place	<input type="text"/>

2nd Emergency Contact

Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
Relationship to Child	<input type="text"/>
Home Telephone No.	<input type="text"/>
Mobile Telephone No.	<input type="text"/>

Special Needs Information

Are there any medical conditions or allergies of which we should be aware of?

Are there any special dietary needs for your child?

Are there any requirements relating to special needs?

Any other information you think we would need to know?

Session Requirements

Do you require Early Drop Off at 7:30am?

Yes

No

Morning Session
8am-1pm

Mon

Tue

Wed

Thu

Fri

Afternoon Session
1pm-6pm

Mon

Tue

Wed

Thu

Fri

Estimated Start Date

Declaration

I have received, read and accept Sweet Peas Terms and Conditions

Yes / No

I enclose a non-refundable booking deposit of £100

Yes / No

I enclose a copy of my child's birth certificate/passport

Yes / No

How did you hear about Sweet Peas Nursery

Parents/Guardian
Signature

Parent 1

Parent 2

Date

Your child may have their photograph taken whilst at nursery and occasionally we may use the photograph for promotional materials such as brochures, leaflets and website. If you would prefer us **not** to use the photographs please tick here

For Office Use Only

Person who dealt with the enquiry

Date of Show around

1 of 4 Settling In Date/Time (With Parent, 1 hour)

2 of 4 Settling In Date (1 hour)

3 of 4 Settling In Date (2 hours)

4 of 4 Settling In Date (4 hours)

Deposit Received

Payment Method

Abacus

Confirmed Start Date