Nursery & Pre-School
Registration Form

Please complete this form & return it together with a copy of your child's Birth Certificate and a £40 non-refundable registration fee payable to Bushey Gan to the address below. BACS details on request.

Full Name of Child: _____ Nationality: _____

Date of Birth: _____ Male ◯ Female ◯

Home Address: _____

_____ Postcode _____

Full name of first Parent / Carer: _____ Relationship to child: _____

Home telephone number: _____ Email Address: _____

Mobile telephone number: _____ Occupation: _____

Full name of Second Parent / Carer: _____ Relationship to child: _____

Home telephone number: _____ Email Address: _____

Mobile telephone number: _____ Occupation: _____

Synagogue at which parents were married: _____ Current Synagogue membership: _____

Date of anticipated entry: _____ Which funding are you eligible for: ◯ 2 Year Old

How old will your child be on entry: _____ ◯ 30 Hours

Everyone gets 15 hours free provision the term after their child turns 3

What are your preferred days: ◯ Monday ◯ Tuesday ◯ Wednesday ◯ Thursday ◯ Friday

Does your child have any medical, special educational needs or disabilities? _____

Does your child have allergies? _____

Please tick your required sessions.

A minimum of two days for a child under 2 years. A minimum of three days for a child over 2 years

		Monday	Tuesday	Wednesday	Thursday	Friday
Early Bird	8.45am - 9.15am	◯	◯	◯	◯	◯
Core Day	9.15am - 12.15pm	◯	◯	◯	◯	◯
Lunch	12.15pm - 1.00pm	◯	◯	◯	◯	
Afternoon	1.00pm - 3.00pm	◯	◯	◯	◯	
Afternoon	1.00pm - 4.00pm	◯	◯	◯	◯	

Signed: _____ Print Name: _____ Date: _____

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Nursery Manager/SENCO: Michelle Peters Mont Dip Ed, BA (Hons) Ed