



Millies Registration Form

<i>Day</i>	<i>Extended School Day (8am-4pm)</i>	<i>School Days (9am-3pm)</i>	<i>Long Mornings (8am-2pm)</i>
<i>Monday</i>			
<i>Tuesday</i>			
<i>Wednesday</i>			
<i>Thursday</i>			
<i>Friday</i>			

Childs details

Name: _____

Surname: _____

Date of birth: _____ Gender: _____

Ethnicity: _____ Religion: _____

Language/s spoken: _____

Address: _____

Postcode: _____

NHS number: _____

Childcare Support Eligibility Code(if applicable): _____

Birth Certificate Number: _____

Parent/Carer - upon signing this form you adhere to the TOB'S set by Millie's Day Nursery LTD and accept the GDPR private policy.

We/I agree to the TOB'S and the GDPR private policy.

Parents signature: _____ Date: _____

Millies's Signature: _____ Date: _____

Registration fee £80.00 - You will receive a Millie's Book Bag and Millie's Drawstring

Paid: YES / NO Date payment received: _____

Parental Responsibility (please circle I or We)
I / We have parental responsibility for the above child.

Parent signature _____ *Date* _____

Parent 1

Name _____ *D.O.B* _____

Address if different from child _____

Mobile Number _____ *Landline* _____

Work address _____

Work phone number _____

National Insurance Number _____

Nationality _____ *Ethnicity* _____

Language/s spoken _____ *Religion* _____

Email Address _____

Parent 2

Name _____ *D.O.B* _____

Address if different from child _____

Mobile Number _____ *Landline* _____

Work address _____

Work phone number _____

National Insurance Number _____

Nationality _____ *Ethnicity* _____

Language/s spoken _____ *Religion* _____

Email Address _____

Emergency contact information

Contact 1

Their name: _____

Their relationship to the child: _____

Contact number: _____

Contact 2

Their name: _____

Their relationship to the child: _____

Contact number: _____

Contact 3

Their name: _____

Their relationship to the child: _____

Contact number: _____