

## Millie's Registration Form

Days	All da 7.30am - 6	•	Morning 7.30am- 1.00pm
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
<u>Childs details</u>			
Name:			
Surname:			
Date of birth:		_ Gender:	
Ethnicity:		Religion:	
Language/s spoken:			
Address:			
		Postcode:	
NHS number:			
Childcare Support Eligibili	ty Code (If applicable	):	
Birth Certificate Number:_			
Parent/Carer signing this Millie's Day Nursery, Bot	• •		•
Parents signature:		Date.	·
Millies's Signature:		Date:	
Registration fee £80.00	Paid: YES/NO		ment received:
Acceptance fee £400	Paid: <b>YES/NO</b>	Date pay	ment received:

## Parental Responsibility (circle I or we)

I/We have parental responsibility for the above child Parent signature: Date: Parents details 1 Name: Date of birth: National Insurance number: Address (if different from the child): Mobile number: \_\_\_\_\_ Home number: \_\_\_\_\_ Work address: Post code: Work number: Email: Nationality: \_\_\_\_\_ Ethnicity: \_\_\_\_ Religion: Language/s spoken: Parents details 2 Name: Date of birth: National insurance number: Address (if different from the child): Mobile number: \_\_\_\_\_ Home number: \_\_\_\_\_ Work address: Post code: Work number: \_\_\_\_\_ Email: \_\_\_\_ Nationality: Ethnicity:

Religion: \_\_\_\_ Language/s spoken \_\_\_\_\_

## Emergency contact information

Contact 1
Their name:
Their relationship to the child:
Contact number:
Email address:
Contact 2
Their name:
Their relationship to the child:
Contact number:
Email:
Contact 3
Their name:
Their relationship to the child:
Contact number:
Email: