

## CHILD ENROLMENT FORM

Should you wish to enrol your child for a place at Cranbrook, please complete and return this form along with the enrolment fee of £35 and signed Terms and Conditions Agreement by post to:-

**Cranbrook Independent Nursery & Pre-School, Administration Office, The Old Post Office, Antlands Lane East, Shipley Bridge, Horley, Surrey, RH6 9TE. Please make your cheque payable to Childcare & Learning (Cranbrook) Ltd and record your child's name on the reverse. Thankyou.**

| Child's Personal Details |                |
|--------------------------|----------------|
| First Name:              | Last Name:     |
| Known as:                | Date of Birth: |
| Child's Home Address:    | Post Code:     |

| Parent/Carer Personal Details |  |  |
|-------------------------------|--|--|
|                               | 1  | 2  |
| Title                         | Mr / Mrs / Miss / Ms / Dr<br>(*Please circle as appropriate) | Mr / Mrs / Miss / Ms / Dr<br>(*Please circle as appropriate) |
| First Name                    |  |  |
| Last Name                     |  |  |
| Home Address<br>(optional)    |  |  |
| Post Code                     |  |  |
| Home Tel                      |  |  |
| Mobile                        |  |  |
| Work Tel                      |  |  |
| Email address                 |  |  |
| Occupation<br>(optional)      |  |  |
| Employer<br>(optional)        |  |  |

|  |  |      |     |       |     |     |     |
|--|--|------|-----|-------|-----|-----|-----|
| Do you require set sessions<br>(a fixed recurring arrangement)?<br>Yes <input type="checkbox"/> No <input type="checkbox"/>  | Do you require flexible sessions to coincide with a roster<br>work schedule?<br>Yes <input type="checkbox"/> No <input type="checkbox"/> |      |     |       |     |     |     |
| Do you have a preferred nursery setting?<br>Yes <input type="checkbox"/> No <input type="checkbox"/>   | If yes, which one?   |      |     |       |     |     |     |
| Please select the sessions that you require:   |  |      |     |       |     |     |     |
|  | Mon  | Tues | Wed | Thurs | Fri | Sat | Sun |
| AM   |  |      |     |       |     |     |     |
| PM   |  |      |     |       |     |     |     |
| Which date do you require your child to commence?<br><b>Please note billing will begin from the date your child commences with us</b>  |  |      |     |       |     |     |     |
| How did you hear about Cranbrook?  |  |      |     |       |     |     |     |
| Your reason for choosing Cranbrook   |  |      |     |       |     |     |     |
| Parent/Carer Declaration -<br><b>In enrolling my child, at Cranbrook Independent Nursery &amp; Pre-School, I have read and agree to abide by all terms and conditions laid down by the Company.</b><br>Parent/Carer Signature: _____ Date: _____ |  |      |     |       |     |     |     |

| OFFICE USE       |  |                |
|------------------|--|----------------|
| Nursery Setting: | Enrolment Fee Received/Banked:<br>Terms & Conditions Received: | Enrolment Ref: |