# **Dawmouse Brunswick Montessori Nursery School**

**34 Haldane Road**

**Fulham**

**SW6 7EU Tel: School 020 7381 9385 Office: 020 8398 9294**

### **Registration form**

Child’s name……………………………………………………………………………

Nationality………………………………….Male/Female……………………………

Date of birth………………………

Parents names…………………………………………………………………………

Address………………………………………………………………………………..

Post code…………………………..Home tel no……………………………………..

E Mail address…………………………………………………………………………

Doctor’s surgery and tel no…………………………………………………………..

Emergency contact and no.(other than parents)………………………………………….

Mobile no.(Mother)…………………………(Father)………………………………..

Work no.(Mother)…………………………...(Father)………………………………..

Any special details of which we should be aware (i.e. allergies,health,diet,sibling )

…………………………………………………………………………………………

Term to commence..Spring(Jan)….Summer(April)……Autumn(Sept)…….20…….

**A full terms notice must be given in writing before your child leaves the school, otherwise a full terms fees will be charged. This registration form will form a contract to this effect.**

Please complete this form and return it with a registration fee of £60 payable to:

**Dawmouse School**,158 Manor Road North,Thames Ditton,Surrey KT7 0BQ

Online banking: Sort code: **30-84-57** Act no: **31153560**

Parents signature………………………………………Date………………………..