



Application Form

Child's Details

Child's full name:

Date of birth:

Home address:

Home telephone:

Home language:

Ethnicity:

Parents' Details

Mother's name:

Profession or occupation of Mother:

Mother's telephone:

Work:

Mobile:

Mother's email:

Father's name:

Profession or occupation of Father:

Father's telephone:

Work:

Mobile:

Father's email:

Doctor's Details

GP's contact Name:

Contact Telephone:

Address:

In Case of Emergency

<i>Emergency Contact 1</i> Name: Relationship: Telephone: Work: Mobile:	<i>Emergency Contact 2</i> Name: Relationship: Telephone: Work: Mobile:
--	--

Individuals collecting child at the end of sessions

<i>Individual #1</i> Name: Telephone: Work: Mobile: Email:	<i>Individual #2</i> Name: Telephone: Work: Mobile: Email:
<i>Individual #3</i> Name: Telephone: Work: Mobile: Email:	

Password

This must be given to staff along with photograph identification, if a person who is not named above collects the child from the nursery.

Child's Medical History

Please include as much detail as possible:

Allergies:

Special needs:

Dietary needs:

Immunisations:

Name of Vaccine:	Date:
BCG	
DTaP/IPV/Hib (8 weeks) PCV	
DTaP/IPV/Hib (12 weeks) Men C	
DTaP/IPV/Hib (16 weeks) Men C PCV	
Hib/Men C (12 months)	
MMR (1 st Dose) (13 months) PCV	
MMR (2 nd Dose) DTaP/IPV Other:	

Any further information you may feel we should know:

Please confirm your consent for us to seek advice from any medical emergency service, including allowing your child to be taken to hospital. **Y / N**

Additional Information

Sessions Required:

Day	Monday	Tuesday	Wednesday	Thursday	Friday
Hours					

LUNCH: £3.70/day Y / N

DANCE: £5.25/session Y / N

YOGA: £5.25/session Y / N

Start date:

How did you hear about Happy Hands Montessori Nursery?

Agreement:

I/We acknowledge that by signing this application form and a start date being agreed, a legally binding contract has come into force between me/us and the nursery, incorporating the Terms & Conditions on the website from time to time, and I/We agree to pay the deposit & any nursery fees that are due.

Mother's / Carer's signature:

Father's / Carer's signature:

Date:

Date:

Please post this application form, along with the deposit of one month's fee, to our Head Office:
Happy Hands Montessori Nursery Ltd, 405 Jubilee heights, 1 Shoot-up Hill, London, NW2 3UQ

Or alternatively hand it in to our nursery setting at:

**Happy Hands Montessori Nursery, South Hampstead Cricket Club, Milverton Road,
Brondesbury Park, London NW6 7AR**

Or Email: happyhandsmontessorishcc@gmail.com

Documents to be photocopied and submitted with Application Form:

- 1- NEG2 Letter (if applicable)
- 2- **FULL** Birth Certificate
- 3- Red Book – Immunisation Section
- 4- Proof of Address (e.g. Utility Letter/Drivers Licence etc.)

Office Use Only

Date of Enrolment:

Start dates at Nursery:

Deposit:

Any further Information: