



# TETTENHALL COLLEGE

## Day Nursery Registration Form

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STUDENT'S SURNAME \_\_\_\_\_

STUDENT'S FIRST NAME(S) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ GENDER GIRL  BOY

PROPOSTED DATE OF ENTRY \_\_\_\_\_

NATIONALITY \_\_\_\_\_ RELIGION \_\_\_\_\_

NAME AND ADDRESS OF CURRENT SCHOOL \_\_\_\_\_

\_\_\_\_\_ POSTCODE \_\_\_\_\_

FULL NAMES OF PARENTS \_\_\_\_\_

ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_

\_\_\_\_\_

POSTCODE \_\_\_\_\_ POSTCODE \_\_\_\_\_

TELEPHONE (HOME) \_\_\_\_\_

TELEPHONE (MOBILE) \_\_\_\_\_ / \_\_\_\_\_

EMAIL \_\_\_\_\_ / \_\_\_\_\_

OCCUPATION(S) \_\_\_\_\_ / \_\_\_\_\_

NAMES AND DATES OF BIRTH OF ANY BROTHERS OR SISTERS \_\_\_\_\_

\_\_\_\_\_

Please note that by signing this form you are entering into a legally binding contract to place your child with this school. If you subsequently decide not to send your child to the School there may be fees due from you. There are terms and conditions indicated which you must read carefully before signing this form.

**Statement by parents of applicant:**

**I/We have read the Fees, Charges and Conditions of entry and we agree to abide by them**

**I/We enclose the Registration Fee of £90 and request that the pupil named above be entered on the list for admission to Tettenhall College.**

Signature (1) \_\_\_\_\_ Date \_\_\_\_\_

Signature (2) \_\_\_\_\_ Date \_\_\_\_\_

Please note that before a pupil can be admitted, this application form must be signed by both parents or persons responsible for payment of fees. When completed, this form should be returned with the Registration Fee to **The Headmaster's Office**.



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Please complete this proforma to indicate which sessions you require your child to attend in the Nursery. You will be able to alter these sessions (subject to availability).

Day		✓		✓		✓
Monday	Full Day		Morning		Afternoon	
Tuesday	Full Day		Morning		Afternoon	
Wednesday	Full Day		Morning		Afternoon	
Thursday	Full Day		Morning		Afternoon	
Friday	Full Day		Morning		Afternoon	