

The Recreation Ground
Off London Road
Stone
Kent
DA9 9DQ

Email: stmarysunder5s@yahoo.co.uk

Registration Form

Name of Child	l:
Date of Birth	;
Boy/Girl:	
Religion:	Nationality:
1st Language:	Home Language:
Parents/Carer	s Names:
Address:	
	Destrode
	(Please note that priority is given to children residing in Dartford, Stone, Greenhithe and Swanscombe, it is your responsibility to inform us of any change of address immediately)
Telephone Nu	mbers:
	(please include home/work/mobile)
Email address	;
My Child is Al	llergic to:
My Child Suff (ie., asthma, hayfe	ers from:ever)
Is there anyt	hing we need to know about your child, ie., do they have any special needs?
•	ld attend another Preschool: f Preschool already attended:
II 30, name o	Treschool un eudy urrended.
•	ily currently involved with any other agencies ie. Early Help, Social Services? if appropriate:
15 hours free think you may (* If you receive of	of Kent County Council Free for 2 year olds scheme (FF2). This offers up to childcare for eligible* 2 year olds during term time. Do you qualify? If you be eligible please tick this box: certain benefits or child tax credit and your child's date of birth falls within a particular date range. There information on this scheme please contact the preschool).

are 3). Our aim is to ensure	that each child will be abl	space at Preschool until they become funded (ie., term after they e to have a year of Early Year's education It is the parents
Date received:		ol and not the responsibility of the Preschool.
I agree to:		
Give 6 week's notice in	writing if I wish to r	emove my child from preschool.
per term to be paid to	cover resource costs	nade we do ask for a voluntary contribution of £5.00 such as arts and crafts. Your support means that activities for your child.
while your child's name sick from the preschool	is on our register. Tol, fees must still be pumstances where fee	ote that fees are non-returnable and must be paid they must be paid if your child is on holiday or off paid as the setting still has to pay for running costs. Is may be waived, e.g. hospitalisation, but you should
Please bring your child record the documenta	•	ficate and passport number (if held), so we can nbers:
Birth Certificate No Passport No		
Parent/Carer name (pr	rint)	
Parent/Carer signatur	е	
Session times are	8.30am - 11.30am 12.15pm - 3.15pm	Monday - Friday Monday - Friday
•	•	ng and would like to ensure that we reach everyone but St Mary's Under 5's Preschool? Please tick one
The poster outside the	e Preschool	
Preschool Website		-]
Church Magazine]
Friend/relative		
Health Visitor/Doctor		
Other (please state)]