



Nursery Place Registration Form

Child's Name: _____ Gender: M/F Date of Birth: _____

Address: _____

Post Code: _____

Parent's Name: _____ Parent's NI Number: _____

Contact Telephone Numbers: _____

Start Date required: _____

Please tick below if you will be using the Government Early Years Funding:

30h funding (Funding Code: _____) 15hr funding

Sessions required:

Nursery Session Preference Form

	Mon	Tues	Weds	Thurs	Fri
Morning -8.45-11.45					
Lunch - 11.45-12.15					
Afternoon - 12.15 - 3.15					

Registration Fee: £ 25.00
 Cost per am session is £ 12.50
 Cost per pm session is £ 12.50
 Cost per lunch session is £ 2.25
 Snacks per session is £ 0.20

Parent/Carer signature: _____ Date: _____

Parent/Carer (Print Name): _____

Please return completed form to:
 Hazeldene Nursery
 Hazeldene School
 Stancliffe Road
 Bedford
 MK41 9AT

If you have any queries please contact us on 01234 300100

Office Use Only

Date form handed in		30h checks carried out	
Place Offered		Start Date confirmed	
Nursery Start Date		Reception Start Date	

Please refer to our Privacy Policy regarding safe use of your contact details