

**PLEASE COMPLETE IN CAPITAL LETTERS**

**REGISTRATION FORM**

**(For admission from September 2011 onwards)**

**Millington Road Nursery School 4a Millington Road Cambridge CB3 9HP**

**Tel: 01223 356565 mary@millingtonroadnursery.co.uk**

**Name of Child:** ..... Please underline first name

**START DATE:** ..... **Age on Entry:** .....

**Child Details**

Home Address:

DOB:

Sex:

Ethnicity: **Please complete overleaf**

Post Code:

Nationality:

Home Tel:

Home Language:

Home email:

Other languages:

Religion, if any:

**Family Details**

How would you like us to address you?.....

**Mother's Details**

Name:

Present or previous occupation:

Work Tel:

Mobile:

Work email:

Are you a King's College Member? Yes/No

Do you have parental responsibility? Yes/No

**Father's Details**

Name:

Occupation:

Work Tel:

Mobile:

Work email:

Are You a King's College Member? Yes/No

Do you have parental responsibility? Yes/No

**Doctor Details**

Doctor's Name:

Address:

Tel:

**Further Child Details:**

Immunisations:

Allergies/intolerances:

(please include a doctor's letter with full details regarding reaction and how we deal with it)

Health: is there anything we should be aware of? (please continue overleaf)

Cultural/Religious dietary requirements:

**Attendance Pattern:**

Please tick the sessions below that you wish your child to attend.

Sessions	Monday	Tuesday	Wednesday	Thursday	Friday
Early Birds 8.15-8.30					
Morning 8.30-1.30					
Afternoon 1.30-3.30					
Night Owls 3.30 -4.30					

If you are not eligible for Early Years Education Funding, you are required to pay a registration fee of £30 when making this application. Cheques to be made payable to **Millington Road Nursery School Trust**

I enclose my registration fee of £30 ..... please tick Predicted Leaving Date: .....

Signature of parent ..... Date .....

**Ethnicity:-**

Please circle appropriate category

White British	<b>WHB</b>	White/Black Caribbean	<b>MWB</b>	Indian	<b>AIN</b>
White Irish	<b>WHR</b>	White/Black African	<b>MBA</b>	Pakistani	<b>APK</b>
Traveler of Irish Heritage	<b>WHT</b>	White and Asian	<b>MWA</b>	Bangladeshi	<b>ABA</b>
Gypsy/Roma	<b>WRO</b>	Any other mixed background	<b>MOT</b>	Any other Asian background	<b>AAO</b>
Any other White background	<b>WHA</b>	Black Caribbean	<b>BLB</b>	Chinese	<b>CHE</b>
Refuse to provide	<b>REF</b>	Black African	<b>BLF</b>	Any other background	<b>OEO</b>
Info not obtained	<b>NOT</b>	Any other Black background	<b>BLG</b>		

**Please detail all allergies/intolerances and other health information:-**