

FLEETVILLE COMMUNITY PLAYGROUP

REGISTRATION FORM



Date of registration:		Start Date (mm/yy): (1 st term after 2½ yrs)	
Name of Child:		Sex:	Male / Female
Date of Birth:		Nationality:	
First Language:		Religion:	
Brothers and Sisters: (please include ages)			
Special requirements: (physical, dietary, other)			
Names of Parents/ Guardians:		Parental Responsibility:	Y/N
Address:			
Postcode:			
Email Address: (We will use this to contact you about Playgroup updates only)			
Telephone – Mobile: (your emergency contact No)		Telephone – Other:	
I agree to pay the fees in advance every half term - please sign:			
I would be willing to help on the parent rota once every half term:		Yes / No	
Do you have any concerns about your child's development?			
We would like you to drop the registration form off in person so we know that you feel comfortable with our setting before we add your child/children to our waiting list. Therefore we would be grateful if you do not post this to the Playgroup. Please include your registration fee (non-refundable) of £15 with this form - cheques made payable to "Fleetville Community Playgroup".		Deposit Paid	Date
		Chq	
		Cash	
Please note: There will be a £50 deposit charged when parents/guardians accept a firm offer of a place. This will be deducted from the first term's fees. If you do not take up the place having formally accepted it, the £50 deposit will be forfeited.			