[](http://www.google.co.uk/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0ahUKEwif-fqEl8fKAhVDVxQKHVaYDHcQjRwIBw&url=http%3A%2F%2Fwww.lavenderfarmnursery.co.uk%2F&psig=AFQjCNGc0ujNdBGJKEwEl2mYXYPJt6oSaQ&ust=1453887465643331)

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Deposit received

Application for Enrolment

On what date will your child be starting nursery?

Child’s ethnicity:

Telephone numbers

Home:

Mobile:

Email:

Address:

Date of Birth:

Child’s Name:

Friday

Thursday

Wednesday

Tuesday

Monday

Morning 8.00am-1.00pm

Afternoon 1.00pm-5.00pm

Evening 5.00pm-5.30pm

Do you wish for your child to attend Term Time or All Year? Term Time All Year

Please select the sessions you require:





Sex:



Mothers name:

NI Number:

Mothers Telephone:

Fathers Telephone:

Fathers name:

NI Number:

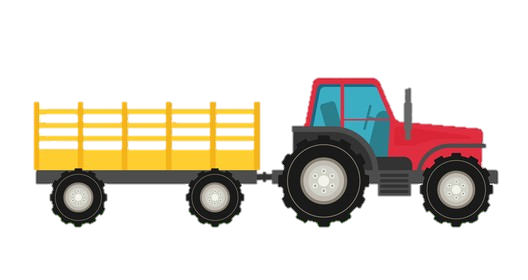
Telephone:

Mobile:

Emergency contact during nursery hours:

Any other information regarding your child e.g. special educational needs, dietary requirements, health conditions, allergies, procedures prohibited for medical/religious reasons or any other information:

**Information provided will be processed in accordance with the requirements of the General Data Protection Regulations 2018. For more information on how we use our data, please see our Privacy Notice on www.lavenderfarmnursery.co.uk**

[](http://www.google.co.uk/url?sa=i&rct=j&q=&esrc=s&source=images&cd=&cad=rja&uact=8&ved=0ahUKEwif-fqEl8fKAhVDVxQKHVaYDHcQjRwIBw&url=http%3A%2F%2Fwww.lavenderfarmnursery.co.uk%2F&psig=AFQjCNGc0ujNdBGJKEwEl2mYXYPJt6oSaQ&ust=1453887465643331)

Contract and

Application



In the event that my child requires medical treatment before I will be able to get to the Hospital, I hereby authorise the Manager, or a delegated member of staff to consent to emergency medical treatment on my behalf.

I understand that this authorisation will remain valid unless I contact the manager to withdraw it.

I confirm that the information given above is correct and I promise to contact the Manager as soon as any of the details change.

I wish to apply for a place at Lavender Farm Nursery.

I have read and understood the information, regulations and policy of the nursery. I agree to fulfil them and any other conditions which may be stipulated at a later date by the nursery.

I understand that one months notice will be given should I wish to withdraw my child from the nursery.

All fees are due in advance by bank transfer, Tax Free Childcare or childcare vouchers on the first day of your child’s attendance. An invoice will be issued during the previous month. For each late payment there will be small charge for each late day.

Other important information regarding fees and attendance:

* You are charged for bank holidays and two weeks for the Christmas holidays
* All absences must be paid for
* A non-refundable deposit of £50.00 is payable with this application and contract. This will be deducted from your final invoice providing one months notice is given in writing
* One months notice is to be given in writing prior to leaving
* The nursery will close for 2 weeks holiday in August, this however will not be chargeable
* All sessions accessed are chargeable; if your child is in receipt of 30 hours free childcare it is your responsibility to update your 30 hour code. If you fail to renew your code you will be charged for any childcare received. If your child leaves before the local government funding deadline you will also be charged for accessed childcare

**Bank details**

Account name: SMBC-Moat Farm Infant School

Sort code: 60-15-39

Account number: 69625441

Bank name: Natwest



**T:** 0121 285 6633

**E:** [sian.stevens@lavenderfarmnursery.co.uk](mailto:sian.stevens@lavenderfarmnursery.co.uk)

**W:** www.lavenderfarmnursery.co.uk

**Please return this application to:**

Lavender Farm Nursery, Brookfields Road, Oldbury, West Midlands, B68 9QR

Date:

Signed (legal guardian):