



APPLICATION TO JOIN

On receipt of the application form and accompanying registration fee, names are added to the waiting list. Children are admitted once they reach 10 months of age, in order of application, except when priority is given to siblings.

Please detach form and return to: info@southoverpreschool.com

8.30am – 6.00pm: Tel (landline): 0208 492 8408

8.30am – 7.00pm: Tel (mobile): 0777 336 0918

Account Details: Southover Day Nursery Ltd
Account Number: 50648241 Branch Sort Code: 60-70-05

SOUTHOVER BLUE ROOM APPLICATION FORM

Child's Name:	
Child's Date of Birth:	
Birth Certificate seen:	Y / N
Parent's Name:	
Parent's Date of Birth:	
National Insurance Number:	
Parent's Email Address:	
Address:	
Home tel. Number:	Mobile Tel. Number:



	Monday	Tuesday	Wednesday	Thursday	Friday
Morning 7:45 am to 1:00 pm					
Afternoon 1:00 pm to 6:15pm					
Full Day 7:45 am to 6:15pm					

I/We wish my/our child's name to be added to the waiting list and I/we enclose a cheque for £100 (made payable to 'Southover Day Nursery Ltd') in respect of the registration fee, which is non-refundable or can confirm I have transferred funds to the Southover bank account (details on the previous page).

I/We understand that registration does not guarantee the offer of a place. We have read and understood all the policies and procedures.

Starting Date:	Date:
Signed:	Print Name: