



The Firs Nursery

Jávea

Photo

REGISTRATION FORM

Personal Details

Child's Surname: _____ Date of Birth: ___ / ___ / ___

First Name(s) _____ Preferred Name: _____

Siblings (names & ages): _____

Family Details:

Father's Name: _____ Occupation: _____ Mobile: _____

Mother's Name: _____ Occupation: _____ Mobile: _____

Guardian (if not the parents): _____ Mobile: _____

Home Address: _____

Tel.: _____ E-mail: _____

Emergency Contacts:

(please state the contact's relationship to the child)

1 _____ Tel. _____

2 _____ Tel. _____

Family contact (in case of extreme emergency):

Name: _____ Relationship _____

Full Address: _____

Telephone Number(s): _____

People authorised to collect the child:

1 _____ 2 _____ 3 _____

(Please inform the school if someone else is going to collect your child.)

Previous School:

Name of School: _____ Address: _____

Head Teacher: _____ Tel. / E-mail: _____

Authorizations:

I/we do/do not give permission for _____ to be photographed and for the photographs to be used for display or advertising purposes.

I/we do/do not give permission for _____ to go out of school on an official school activity, accompanied by a member of staff.

I/we do/do not give permission for _____ to travel in a member of staff's car. (Only in an emergency)

I/we have read and understand the school rules and general terms and conditions and agree with them (understanding that, in the best interest of the School, the Head Teacher may make changes to these from time to time.)

Signed: (Father) _____ (Mother) _____ (Guardian) _____
Date: _____ Date: _____ Date: _____