



Registration and Booking Form

Nursery : _____

Location: _____

Child's details

Surname: _____

First name: _____

Date of Birth or due date: _____ Gender: _____

Address: _____

Parents or Guardians details

Name: _____

Home no: _____ Mobile no: _____ Work no: _____

Address: _____

E-mail address: _____

Alternative contact: _____

Home no: _____ Mobile no: _____ Work no: _____

Address: _____

E-mail address: _____

Start Date Required: _____

Sessions	Times	Monday	Tuesday	Wednesday	Thursday	Friday
Full Day	8.00-18.00					
Morning	8.00-12.30					
Morning with Lunch	8.00-13.30					
Afternoon	13.30-18.00					
Afternoon with Lunch	12.30-18.00					

I have read and agree with the terms and conditions of Saurus Nurseries.

Parent's signature: _____ Date: _____

Please Print Name: _____

* Note: Please remember to include your £100 registration fee when returning the booking form and a copy of your child's birth certificate. Once a start date has been confirmed, it cannot be changed.

46 Cromwell Road, Hove, East Sussex, BN3 3ER, E. Sussex

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