

Polly Anna's

Daycare Nursery

3 North Lane, Haxby, York. YO32 3JP Tel. 01904 765049

Pre Registration & Booking Form for Children aged Under 1 Year

TO RESERVE YOUR CHILD'S BOOKING, PLEASE RETURN WITH APPROPRIATE DEPOSIT
TO THE ADDRESS ABOVE AS SOON AS POSSIBLE.

1. Full Name of Child.....
2. Date of Birth:.....
3. Child's Address:.....
.....
.....
..... Post Code.....
4. Shared Care? (Separated Families) Yes / No
5. Main Carer's Name:
Telephone Number:
Email Address:
Day Month Yr
6. What date you would like your child to start at the nursery:
7. How old will your child be on that date: Years..... Months

Please indicate with a tick the days and sessions required.

	Mon	Tue	Wed	Thurs	Fri
A.M.					
P.M.					
ALL DAY					

(If we are unable to offer you the days and sessions you have requested, we will try and suggest alternatives or place your child's name on our waiting list.)

8. **Deposit**
As this booking is either for an expected child or one that has been recently born, we must point out that due to the long term commitment we are making when taking your booking, we must ask you to make a similar commitment to us.
We therefore ask for a deposit of **£150.** If your original booking is not amended, altered or changed in any way, i.e. a later starting date (your booking would then be subject to availability) or a reduction in days/sessions, etc. on starting nursery your first invoice will have a £75 credited added to it. The remaining balance will be refunded on leaving Nursery subject to a minimum 6 months contract. Please pay deposit by Bank Transfer, details below.
9. We recommend a minimum booking of 4 sessions (or day/session)
10. We will share your contact details with your local City of York Childrens Centre. Please tick here if you do not wish for this information to be shared with them.

I wish to book my child into Polly Anna's Daycare Nursery and understand the conditions of booking.

Signature of Main Carer.....Date.....

Bank Details:

Account Name: Polly Annas Nursery
Sort Code: 09-02-22
Account Number: 10452455
Reference: (Your Childs Name)

Deposit Paid By Bank Transfer

(Please tick Box to Confirm)