

Registration Form

(Mrs/Ms/Miss/Mr) _____

(Postcode) _____

E-mail _____

Day _____ Evening _____

Desired Start Date: _____

Session Requirements (please tick):

	Mon	Tues	Wed	Thurs	Fri
Full Day (8am-5.45pm)					
Mornings (8am-12.00pm)					
Lunch (12.00-1pm)					
Afternoons (1.00pm-5.45pm)					
Morning Montessori Session for 3-5 year olds. (9.00-12.00 pm))					
Afternoon Montessori Session for 3-5 year olds. (1.00-4.00pm)					

I enclose a £50 (non-refundable) administration fee. Please make cheques payable to 'Sunshine Montessori Nursery'.

Signed: _____

Date _____

We will inform you as soon as possible whether your application for a nursery place has been successful as well as providing you with a full list of our terms and conditions