



# Milverton House Nursery

43 Lutterworth Road, Nuneaton CV11 4LE

Tel: 02476 387430

Email: [reception@milvertonschool.com](mailto:reception@milvertonschool.com)

Web: [www.milvertonschool.com](http://www.milvertonschool.com)

## APPLICATION FORM

Admission start date: .....

Full Name of Child: ..... Male/Female (delete as applicable)

Date of Birth: ..... Password: .....

Name of Parent or Guardian responsible for Fees: Mr/ Mrs Ms.....

Address: .....

..... Post Code: .....

Home Tele: No: ..... Mobile No. ....

Emergency Tel: No1 ..... Contact Name1.....

Emergency Tel: No2..... Contact Name2.....

Family Doctor Name: .....

Address: .....

..... Post Code: ..... Tel: No: .....

Any Allergies or problems of which the Nursery should be aware: .....

.....

### FEES

Fees for the Nursery Department are charged monthly and payable in advance. Four weeks notice in writing is required prior to the removal of a child or a full months fee will be charged. Places cannot be held at Nursery if fees are not paid within two months and as a result a £50 charge will be incurred. For any child collected after 5.30pm there will be a £10 charge to cover the staff

### DECLARATION TO BE SIGNED BY PARENT OR GUARDIAN

I, the undersigned being the parent/guardian\* of

.....(Child's name in full)

Hereby acknowledge that I have read and agreed to the terms and conditions above.

I enclose a registration fee (non-returnable) of £30.00.

Signature: ..... Date: .....

\* Please delete whichever does not apply.

Please circle relevant information below:

Nursery Unit    Toddler Unit    Baby Unit                      Start Date:

Sessions:        AM Mon Tues Wed Thurs Fri  
                      PM Mon Tues Wed Thurs Fri