



Climbing Bears Pre School - Enrolment Form

Office Use Only

Date:		Fee:		Letter:		WP:		Start	
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Child's Name: _____ Date of Birth: _____

Name of Parent's /Carer's: _____

Address: _____

Post Code: _____ Home Tel: _____

Mobile: _____ Work: _____

Email: _____

Doctor's Name: _____

Address: _____

Telephone: _____

Are your child's immunisations up to date?

Information you think we should know ie health:

When would you like your child to start?

Days you wish your child to attend:

Monday		Tuesday		Wednesday		Thursday		Friday	
am	pm	am	pm	am		am	pm	am	

Please confirm these with the Manager as soon as possible.

The Manager will contact you to arrange visits prior to the start date for familiarisation of your child. Please enclose the administration fee (Non-refundable) of £45 with this form. (Please make all cheques payable to Climbing Bears, receipts can be issued of request.)

Signed: _____ Date: _____

Early years learning through play - a community run group