

The Island Day Nursery - Entry Contract

Child's full name:		Date of Birth:			Boy/Girl	
Address:	Requested Sessions:					
		M	T	W	Th	F
	AM					
	PM					
Postcode:	Start Date:					
Mother's full name & designation (eg: Mrs/Miss/Ms/Dr):			Father's full name & designation (eg: Mr/Dr):			
Address & Telephone Number (if different from above):			Address & Telephone Number (if different from above):			
Home Telephone Number:			Home Telephone Number:			
Mobile Telephone No:			Mobile Telephone No:			
Email address:			Email address:			
Name, address and telephone number of employer:			Name, address and telephone number of employer:			
Alternative work contact - emergency use only (full name and telephone number):			Alternative work contact - emergency use only (full name and telephone number):			
<p>Our preferred method of payment is Standing Order for which we offer a discount of 2.5% on fees due. Credit/Debit cards, cheques and cash are also accepted. I wish to pay by: Standing Order/Credit/Debit Card/Cheque/Cash (Please delete as appropriate): Please indicate the frequency of payment: Monthly/Fortnightly/Weekly, in advance</p>						
<p>I/We understand that by signing this contract I/we will:</p> <ul style="list-style-type: none"> <i>* be charged a non-refundable Registration Fee equal to my child's first week's fees, if the Nursery is able to offer my child a place. This will be capped at £50 if the weekly fees are greater.</i> <i>* be charged in advance for fees at the current rate applicable based on the hours my child attends Nursery</i> <i>* pay our fees in advance of each week/fortnight/month (as indicated above)</i> <i>* understand that there will be no adjustments for nursery closures, absences or public holidays</i> <i>* be charged one's days retainer for full-time children and half fees for part-time children for two weeks holiday of our choosing in each year and for one week during normal Nursery closure between Christmas and New Year (notice of intent to take holiday must be given to the office as soon you know your holiday dates - thank you)</i> <i>* give one months' notice in writing if we no longer require the nursery place</i> <i>* be charged one months' fees in lieu of notice if we fail to give the required notice as detailed above</i> <i>* agree to abide by all of the Nursery's policies and procedures</i> <i>* acknowledge that The Island Day Nursery may terminate this agreement, giving us four week's notice of their intention to do so.</i> 						
Signed (Mother):			Signed (Father):			
Date:			Date:			
Please supply a password, which will be kept on file, this is to ensure that we only ever hand over your child to you or your nominated person or persons:						
Office use only: Non-Refundable Registration Fee Received: £ Name Peg/Sign/Balloon/Hanging File/Superfox A/C/Emer. Evac. File/Class Lists/Meal Lists/Allergy List/Outings File/Keyperson Allocation/Key Code			Signed: _____ Date: _____			