



Application Form – 2019 Spring holiday club for 2-7 year olds

Please use a separate form for siblings

Child's name:	Date of birth:
Address:	Parent's name:
Language spoken at home:	Parent's contact number:

Child's medical details

Doctor's name:	Does your child have any known allergies? ▪ Yes / No
GP surgery:	Other medical conditions:
Surgery phone no:	EMERGENCY CONTACT DETAILS: Name: Relationship: Contact no:
Dietary requirements (if any):	

Please tick the relevant days and sessions that you would like to book.

Sessions am/pm	Mon 8 th April	Tue 9 th April	Wed 10 th April	Thu 11 th April	Fri 12 th April
am 09:00-12:00					
pm 12:00-15:00					
Total Sessions Booked (am & pm) #				TOTAL COST	£

Sessions am/pm	Mon 15 th April	Tue 16 th April	Wed 17 th April	Thu 18 th April	Fri 19 th April
am 09:00-12:00					GOOD FRIDAY - CLOSED
pm 12:00-15:00					GOOD FRIDAY - CLOSED
Total Sessions Booked (am & pm) #				TOTAL COST	£

Fees and Charges

- All sibling attendance to be discussed and agreed in advance with Jacky.
- Please note sibling rates only apply if more than one child is attending the same session.

- **10% early bird discount (payment made before 8th March 2019)**
- **£50 for Full Day 09:00 – 15:00 for registered Horsham Montessori children (£40 for siblings).**
- **£25 for Half Day 09:00 – 12:00 or 12:00 – 15:00 for registered Horsham Montessori children (£20 for siblings).**

Terms and Conditions

- All fees must be paid in advance of attendance at the Holiday Club.
- Changes and cancellations must be made by email or in writing.
- There are no refunds if cancellations are made less than 4 weeks prior to start of the Holiday Club.

GDPR Compliance

Horsham Montessori will adhere to the principles of the General Data Protection Regulations (2018) when collecting and processing information about you and your child. We explain how your data is processed, collected, kept up-to-date in our Privacy Notice which is available on our website.

I agree to the terms and conditions for the Spring Holiday Club.

Print name _____

Signature _____

Date _____

Payment method using online banking

Please make payment to the following account:-

Account name: Horsham Montessori Ltd Sort Code: 20-42-58 Account no: 20884596

Please include your child's name as a reference for the payment.

Other payment methods

- We accept childcare vouchers. Please ensure payment reaches us before closing date for early bird discounts.
- Cheques
We charge a £1.50 fee for cheque payments.
All cheques should be made payable to Horsham Montessori Ltd and handed in to the office or sent to PO BOX 370, Ashford, TW15 9EL

Please contact the office on **01403 750504** if you need any further information or email

sharonoffice.horshammontessori@gmail.com

Additional registration forms are available from the nursery and available to download from our website

<http://www.montessori-uk.co.uk/>

Staff signature:

Date received (for official use only):