

055-NURSERY / BLOSSOM: 04.348.6275 / BLOSSOM VILLAGE : 04.394.8837
www.theblossomnursery.com

1. CHILD INFORMATION

First Name: _____ Birth Date: _____ / _____ / _____
 Family Name: _____ Age/Sex: _____ / _____
 Nationality/Passport: _____ Religion: _____
 First Language: _____ Other Language(s): _____
 Has Child attended nursery before? _____ Nursery Name: _____

2. FAMILY INFORMATION

Father's Name: _____ Nationality: _____
 Profession: _____ Language(s): _____
 Mother's Name: _____ Nationality: _____
 Profession: _____ Language(s): _____
 Brothers' and or sisters' names and dates of birth:
 Name: _____ Birth Date: _____ / _____ / _____
 Name: _____ Birth Date: _____ / _____ / _____
 What Schools do Siblings attend? _____

3. CONTACT INFORMATION

Home Address: _____ Bldg/Villa/ Apt: _____
 P.O. Box: _____ Area: _____
 Telephone Numbers:
 Mother Home: _____ Father Home: _____
 Mother Office: _____ Father Office: _____
 Mobile: _____ Mobile: _____
 Email: _____ Email: _____
 Emergency Contact:
 Name: _____ Relationship: _____
 Home Telephone: _____ Mobile: _____

Please advise which parents name to invoice if required for a company and which email ID to use for communication by use of an asterisks (*). If not asterisked, mother's details will be used. In the event of an emergency we contact the mother first, if you wish for the father to be contacted in the first instance, please initial here: _____.

4. AUTHORISED PERSONS TO COLLECT CHILD FROM NURSERY (other than parents as listed overleaf)

1st Person Name: _____ Relation/Gender: _____ /
2nd Person Name: _____ Relation/Gender: _____ /
3rd Person Name: _____ Relation/Gender: _____ /

5. ENROLLMENT PREFERENCES (please circle)

1. Academic Term OR All Year 8am-1pm 8am-3pm 8am-5pm 8am-6pm Other
2. Name of Class: _____ Start Date: _____
3. Circle Days: Sunday Monday Tuesday Wednesday Thursday
4. Skillplay _____ Summer Camp: _____ 7:30am Breakfast Express: _____

Please make notes regarding preferences and Camps / Skillplay (ie. no. weeks enrolled/ times etc.):

6. REGISTRATION CHECKLIST/AGREEMENT TO TERMS & CONDITIONS

Please attach 1 copy of the following:

- Child's Passport & Visa and Fathers Passport & Visa
- Child's Birth Certificate
- Blossom Medical Questionnaire and Child's Immunization Records
- Colour Passport size Photo of Child and 4x6 photo of Child to be used for Smartbook
- Deposit, Medical + Uniform + Books fees and Registration fees

Fees are due in full at least 3 weeks before the first day of enrollment / before term commencement. Late or incomplete payment may result in loss of seat allocation and registration fees and deposits.

We take video and photographs of our children for the Smartbook, brochures, website and social media community applications etc. We notify parents of special events, closures, illness and various nursery information via email / newsletter. Please advise in writing if you do not want this done and decline to share your information with other nursery parents. We reserve the right to limit enrollment and spaces at our discretion, which is subject to change without notice. By signing below you are thereby agreeing and accepting The Blossom Children's Nursery Terms and Conditions in full and will be bound by them as they stand.

Date: _____ Signature of Parent/Guardian: _____

FOR OFFICE USE ONLY:

Date Received: _____ Signature: _____ Follow up: _____