



TINY TOES HOLIDAY CLUB
17-19 Mellor Road
Cheadle Hulme
Stockport
SK8 5AX
Tel: 0161 488 4242

ENROLEMENT FORM

CHILD'S NAME

DATE OF BIRTH

NAME AND ADDRESS OF PARENTS/GUARDIANS
.....
.....
.....

HOME TELEPHONE NUMBER
.....

ADDRESS AND TELEPHONE NUMBERS OF
PARENTS PLACE OF WORK

MOTHER.....

WORK TEL NO

FATHER

WORK TEL NO

NAME, ADDRESS AND TELEPHONE NUMBER OF
PERSON TO CONTACT WHO WILL COLLECT YOUR
CHILD IF REQUIRED TO DO SO WHEN PARENTS
CANNOT BE CONTACTED (PLEASE STATE
RELATIONSHIP)

.....
.....
.....

DETAILS OF ANY MEDICAL CONDITION, ALLERGY
OR DISABILITY AFFECTING YOUR CHILD

.....
.....
.....

IF YOUR CHILD IS ON REGULAR MEDICATION
PLEASE GIVE DETAILS, IF YOU WISH US TO
ADMINISTER MEDICATION A FURTHER FORM
FROM THE OFFICER IN CHARGE/DEPUTY SHOULD
BE COMPLETED

.....
.....

DETAILS OF ANY DIETARY REQUIREMENTS

.....
.....
.....

DETAILS OF INFECTIONS/IMMUNISATIONS ALREADY RECEIVED BY YOUR CHILD

.....
.....

NAME, ADDRESS AND TELEPHONE NUMBER OF FAMILY DOCTOR

.....
.....
.....

PLEASE TICK APPROPRIATE SPACES BELOW FOR THE DAYS YOU REQUIRE IN THE _____ HOLIDAY

	MORNING SESSION	AFTERNOON SESSION	8 HOUR DAY	8 HOURS PLUS
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				

PAYMENT OF FEES

FEES ARE TO BE PAID IN FULL ON THE FIRST DAY YOUR CHILD ATTENDS THE HOLIDAY CLUB IF THEY ARE NOT A 5% CHARGE WILL BE PUT ON EVERY DAY IT IS LATE.

TWO WEEKS NOTICE IN WRITING IS REQUIRED OR PAYMENT IN LIEU THEREOF IF A CHILD IS TO LEAVE THE HOLIDAY CLUB.

A £15 DEPOSIT IS REQUIRED IN ORDER TO SECURE A PLACE FOR YOUR CHILD AT THE HOLIDAY CLUB.

THE £15 DEPOSIT WILL BE DEDUCTED FROM YOUR FEES.

IN ORDER TO SECURE YOUR PLACE AT THE NEXT HOLIDAY CLUB IN _____ YOU WILL NEED TO PUT ANOTHER DEPOSIT DOWN.

I/WE CERTIFY THAT THE ABOVE DETAILS ARE COMPLETE AND ACCURATE AS AT TODAYS DATE.

I/WE WILL INFORM THE NURSERY IN WRITING OF ANY ALTERATIONS OR ADDITIONS TO THE ABOVE INFORMATION.

SIGNATURE OF PARENTS DATE