



# Bubbles & Giggles Nursery

## Registration Form

Full Name of Child

Child's gender

Boy

Girl

Date of Birth (dd/mm/yyyy)

Place of Birth

Religion

Nationality

Passport Number

Visa Number

Address

Home Telephone Number

Home e-mail address

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Documents to be attached

Photocopy of Passport with Visa Page

Tick if attached

Birth Certificate

Tick if attached

Photograph of Child



# Bubbles & Giggles Nursery

## Parent Details

Father's Name

Mobile Number

Occupation

Place of Work

Work Place Telephone Number

Work Place e-mail address

Mother's Name

Mobile Number

Occupation

Place of Work

Work Place Telephone Number

Work Place e-mail address

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Photograph of Mother

Photograph of Father

Documents to be Attached

Photocopy of Passport with Visa Page

For Father. Tick if attached

Photocopy of Passport with Visa Page

For Mother. Tick if attached



# Bubbles & Giggles Nursery

## Authorised People who may collect your Child

### Authorised Person I

Authorised Person's Name

Mobile Number

Address

### Authorised Person II

Authorised Person's Name

Mobile Number

Address

Photograph of Authorised Person I

Photograph of Authorised Person II

Signature of Authorised Person I

Signature of Authorised Person II

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Documents of Authorised Person I & II to be attached

Photocopy with Visa Page

For Authorised Person I & II. Tick if attached

1 extra photograph (for Gate Pass)

For Authorised Person I & II. Tick if attached



# Bubbles & Giggles Nursery

## Parent Consent Form

I have enclosed the non - refundable Registration Fee.

Where two legal parents / guardians are responsible for the child, both the parties must sign all areas of consent. I / We give consent that my / our child will make visits to local amenities including parks and libraries.

Signature with Date

Signature with Date

I / We have read, understood and agree to the terms, fees and conditions as described in the policies.

Signature with Date

Signature with Date

I / We authorise the Nursery to allow emergency medical treatment to my / our child. I / We acknowledge that neither Bubbles & Giggles Nursery or staff shall incur any liability whatsoever in relation to a practitioner's decision to administer such treatment or treatment itself. (Every effort will be made to contact a parent or authorised person before such agreement is auctioned).

Signature with Date

Signature with Date

I / We will inform the Nursery in Writing when any of the information contained on this registration form changes.

Signature with Date

Signature with Date

Is there anything else we should know about your child or family?