



QUINTON HALL NURSERY
PART OF QUINTON HALL SCHOOL
Hindes Road, Harrow, Middlesex HA1 1RX

Tel: 020 8427 1304 Fax: 020 8861 8861
Email: admin@quintonhall.org.uk
Website: www.quintonhall.org.uk

NURSERY APPLICATION FORM

To be returned to the Headmaster as soon as possible with the signed letter of acceptance.

Intended Date of Entry:

Month	Year
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Please indicate which session you would prefer:

Morning	Afternoon
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Child's Name:

Surname	(Boy/Girl*)	First Name/s
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Date and Place of Birth:

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Religion:

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Is the Quinton Hall Nursery your first choice?

	Yes/No*	* (Delete as Appropriate)
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Father's Name:

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Occupation:

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Mother's Name:

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Occupation:

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Full Home Address:

Telephone numbers:

Home:	Home:
Work:	Work:
Mobile:	Mobile:
E-mail:	E-mail:
(Mother)	(Father)

We would be grateful if you would indicate here how you were introduced to, or came to hear of, the Quinton Hall Nursery:

I/We hereby register my/our child for admission to Quinton Hall Nursery, having read the Nursery information and undertake to conform to all the Rules & Regulations of the Nursery as set out in those documents and as amended from time to time. I/We fully understand and agree the requirements that fees are payable on the first day of term and that a full 8 weeks' notice in writing of any intention to withdraw a child from the Nursery must be given, failing which 8 weeks' fees are payable instead of such notice.

Both Parents' Signatures:

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Date:

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