



Rainbow Nursery School Application Form

I would like to register my child to attend the nursery as indicated:

Morning Session

Sheen Park

Ormond Road

Sheen Common

Afternoon session (Sheen Common only)

Child's Surname: _____

Child's Forename(s) _____

Date of Birth: _____

Parent / Guardian name: _____

Address: _____

Postcode: _____

Contact Telephone: Home: _____

Work: _____ Mobile: _____

Email: _____

Signature: _____ Dated: _____