

Welcome to Jigsaw Nursery Registration Form

Child Data

7am-2pm

First Name:		Date of Bi	rth:		
Last Name:		Age/Gend	Age/Gender:		
Nationality:		Religion:	Religion:		
Family Data					
Fathers Name:		Nationalit	Nationality:		
E.I.D Number:		Occupatio	Occupation:		
Mothers Name:		Nationalit	Nationality:		
E.I.D Number:		Occupatio	Occupation:		
Contact Details					
Home Address:					
Father Email Address:					
Mother Email Address:					
Telephone Numbers					
Father Daytime:		Father Mo	bile:		
Mother Daytime:		Mother M	Mother Mobile:		
Attendance: (minimum of 2 days per week, those days must be the same every week. FS1 aged children must attend 5 days per week)					
Monday	Tuesday	Wednesday	Thursday	Friday	

7am-6pm

7am-5pm

Names of other persons who are authorised to pick up your child*:				
Full Name:				
Full Name:				
*Please provide us with an ID copy/passport size photograph of persons named above				
Please sign below (by signing you are agreeing to the Terms and Conditions of Jigsaw Nursey- please read these prior to signing)				
Parent Signature:				
Mother or Father:				
Date:				

Please provide us with the following documents:

- o 2 recent passport size photographs of your child
- o Copy of your child's ID
- o Copies of Mother and Father's ID's
- o Copy of Mother and Father's visa page (where applicable)
- o Copy of child's immunisation details