



177-189 Sparrows Herne, Bushey, Herts, WD23 1AJ
Registered charity No: 242552

Registration form for non-funded children (From 2nd birthday)

PLEASE WRITE CLEARLY

9:15am to 12:15 pm

Child's Name:.....

Date of birth: Male / Female

Full name of Mother:

Full name of Father:

Maiden Name:

.....

Occupation:.....

Occupation:.....

Home Address:

Home Address: (if different)

.....

.....

Post code:

Post Code:

Tel No: home

Tel No Home:

Mobile:

Mobile:

Email:

Email:

Synagogue at which parents were married:

Current Synagogue membership:

Name of older siblings who attended Bushey Gan:

Date attended:

1).....

.....

2).....

.....

3).....

.....

PLEASE TICK WHERE APPROPRIATE

Date of anticipated entry:

Please indicate the number of sessions per week you would like your child to attend: 3 4 5

Days are allocated according to the legal teacher: Child ratio

Preferred days: (Subject to availability. Working parents and siblings have priority)

Please indicate which of the following sessions you would like your child to attend:

Early Bird 8:45am – 9:15pm: Monday Tuesday Wednesday Thursday Friday

Lunch 12:15pm – 1pm: Monday Tuesday Wednesday Thursday

Afternoon sessions 1pm – 3pm: Monday Tuesday Wednesday Thursday

Afternoon sessions 1pm – 4pm: Monday Tuesday Wednesday Thursday

Subject to numbers and ratio

Signed: Date:

This completed form should be sent together with a cheque for £40 registration fee (non-refundable) and a *photocopy* of your child's full birth certificate (known as the 'certified copy of birth entry'). **PLEASE NOTE: Short birth certificate is not acceptable. Please send to: Ms D Boder, at the above address.**

PLEASE MAKE CHEQUES PAYABLE TO 'BUSHEY GAN'