



Iverna Gardens Montessori

Directress: Felicity Marrian

REGISTRATION FORM

Child's first name (the name you want him/her to be known as) and last name

Boy

Girl

Date of birth

Parents' first and last names (include any title). Please underline last name

Address

Telephones: home, work, mobile, emergency (give name of contact)

Email (please write clearly in capitals)

Profession(s) of parents

Doctor's name and address

Language(s) spoken at home

Have you seen the school

Yes

No

I enclose an administration fee of £50 (non-returnable). I agree to pay each term's fees in advance and acknowledge that a term's notice IN WRITING is required for the removal of my child from the school or a term's fees will be forfeited. If I accept a place at the school, I agree to pay the first term's fees even if, for whatever reason, I subsequently decide not to take up the place. I agree to let my child be photographed, videoed or "observed" and go on properly supervised outings

Signed

Date

School address only: Armenian Church Hall, Iverna Gardens, London W8 6TP
Correspondence (including this form) to: 1 Coulson Street, London SW3 3NG
020 7937 0794 (school), 020 7565 0850 (admin), 020 7912 4824 (fax), admin@iverna.com
Website: <http://www.iverna.com>

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