



T: +971 (4) 352-3600
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E: info@steupnursery.com
W: www.stepupnursery.com

Nursery Enrolment Form

1 Child Information		
First name:	Family Name	
Nickname (if any):	Date of birth:	Gender:
Nationality:	Religion:	
First Language:	Other languages:	
Has your child attended nursery before?	If yes, nursery name:	
Sibling's first name:	Date of birth:	Gender:
What school/s do sibling(s) attend?		

2 Family Information	
Father's first name:	Family name:
Nationality:	Profession:
Employer:	Office no.:
Home no.:	Mobile no.:
Email:	
Mother's first name:	Family name:
Nationality:	Profession:
Employer:	Office no.:
Home no.:	Mobile no.:
Email:	

3 Address of Residency	
Building / Development name:	Street no.:
Building / Villa / Apt. no.:	Area
Nearest landmark:	
PO Box.:	Emirate:
Is the above address for both parents? (check one)	<input type="checkbox"/> Yes <input type="checkbox"/> No

4 Emergency Contact Information		
(Contact 1) First name:	Family name:	
Mobile no.:	Home no.:	Office no.:
Relationship to child:		
(Contact 2) First name:	Family name:	
Mobile no.:	Home no.:	Office no.:
Relationship to child:		

Villa 28, Intersection 54/55, Near World Trade Center Round About, Dubai, U.A.E.



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5 Pickup Contact		
Please provide us details of the person/s authorized to collect you child from nursery.		
(Contact 1) First name:	Family name:	Gender:
Mobile no.:	Relationship to child:	
(Contact 2) First name:	Family name:	Gender:
Mobile no.:	Relationship to child:	
(Contact 3) First name:	Family name:	Gender:
Mobile no.:	Relationship to child:	

6 Enrollment Preference			
Term Preference (*Academic Year)	<input type="checkbox"/> Fall Term	<input type="checkbox"/> Winter Term	<input type="checkbox"/> Spring Year:
(*Academic Year + **Extended Year)	<input type="checkbox"/> Full Term + Half Term Camp + Winter Camp	<input type="checkbox"/> Winter Term + Half Term Camp + Spring Camp	<input type="checkbox"/> Spring Term + Half Term Camp + 4 weeks Summer Camp
Days Preference	<input type="checkbox"/> 5 Days	<input type="checkbox"/> 3 Days	<input type="checkbox"/> 2 Days
Timing Preference	<input type="checkbox"/> 8:00 AM - 12:30PM	<input type="checkbox"/> 8:00 AM - 2:00PM	<input type="checkbox"/> 8:00 AM - 6:00PM
Early/Late Timing	<input type="checkbox"/> 7:00 AM - 8:00AM	<input type="checkbox"/> 6:00 PM - 7:00 PM	
Infant Timing	<input type="checkbox"/> 8:00 AM - 12:30PM	<input type="checkbox"/> 8:00 AM - 2:00PM	<input type="checkbox"/> 8:00 AM - 6:00PM
Early/Late Timing	<input type="checkbox"/> 7:00 AM - 8:00AM	<input type="checkbox"/> 6:00 PM - 7:00 PM	
*Academic Year:	3 Terms (Fall, Winter & Spring). 1 term = 3months. Approximately 180 term days.		
**Extended	Approximately 225 days, this programme includes Winter Camp, Spring Camp, Summer Camp and Half Term Camps. Children are entitled to the same hours parents have selected for nursery. Additional hours must be paid separately.		

I have read, understand and agree to abide by the terms and condition as set forth by StepUp Nursery.	
Parent/Guardian First Name*: (Please Print)	Family name:
Signature:	Date:
<small>*By entering your name in this field, you have agreed & accepted all StepUp Nursery terms, conditions and policies laid down in the prospects, parent handbook & registration.</small>	

For Internal Use:	
Date Received:	Signature:
Follow up:	For: Others:
Receipt no.:	For: Retainer, Registration, Medical, Tuition
T+C Received:	Start Date:

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