

APPLICATION TO JOIN WAITING LIST (form 09.01b)

CHILD Date of birth	
First name (s)	
Surname	
Address	
Postcode	
Potential medical concerns/allergies (please continue overleaf if necessary)	
MAIN PARENT/CARER Name	
Relationship to child	
Tel no.	Email
How did you hear about us?	

Depending on demand, the number of sessions offered may be limited - sessions will be agreed with you, typically at least one term in advance of your child's start. Please note that *Mondays are only for 'Riser' children (the year preceding primary school), and full days are not available to children until they are 2½. The minimum weekly allocation is 2 session,s consisting of one morning and one afternoon.

- Please tick the sessions you would like and enter your preferred start date * (September is our main intake; admissions at other times are dependent on spaces remaining after this).
- If your child is at or has previously attended another setting, please provide details overleaf.
- **A £35 administration fee is required; if your child joins as fully funded, this will be credited back to you. Please pay to a/c 65847240, sort code 089299 quoting your child's name.**

FUNDING - we will ask you for an eligibility code and your national insurance number if you qualify for funding other than 'Universal for 3&4 year olds'. Check your eligibility and get codes on the Government website here - www.childcarechoices.gov.uk/.

- If you expect to be eligible for funding, please indicate by circling below (this will be confirmed with you prior to your child starting).

Universal 3&4 year old/ Extended 3&4 year old/ Working families 2 year old/ Benefits-based 2 year old.

* Preferred start date	* Mon	Tue	Wed	Thu	Fri
Morning (8.45-11.45am)					
Afternoon (12.15-3.15pm)					
Full day (8.45am-3.15pm)					

If you accept a place, further personal information will be required. You will be asked to complete forms that may request your consent to process specific personal data. Completion of this form adds your child to our waiting list, it does not guarantee a place will be available.

Parent/Carer signature Name Date

