

# APPLICATION TO JOIN WAITING LIST (form 09.01b)

<b>CHILD INFO</b>	
Date of birth	
First name(s)	
Surname	
Address	
<b>MAIN PARENT/CARER INFO</b>	
Name	
Relationship to child	
Tel no.	
Email	
How did you hear about us?	

Due to demand, the number of sessions offered may be limited. Our main intake is in September each year; admissions at other times are dependent on spaces remaining after this. Sessions will be agreed with you, usually at least one term before your child's start. The minimum weekly allocation is 2 sessions on at least 2 days, typically a mix of mornings & afternoons.

- Please tick the sessions you would like and enter your preferred start date.
- A £35 administration fee is required, please ensure this is paid. If your child joins as fully funded, this will be refunded. Please pay to a/c 65847240, sort code 089299 quoting your child's name.
- If your child has any special needs, health issues or allergies, please provide full details on the back of this form and tick here:

**FUNDING** - If you expect to be eligible for funding, please indicate by circling below \* (this will be confirmed with you prior to your child starting). 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/](http://www.childcarechoices.gov.uk/).

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

Preferred start date:					
Please note Mondays are only available to children in their final pre-school year	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 .....

