**Nazeing Pre-School, c/o Nazeing Primary School, Hyde Mead, Nazeing. EN9 2HS**

**BEARS APPLICATION FORM**

For children who will start in their nursery school year.

All applications will be put onto our waiting list and when a place is available you will be contacted with further joining information.

**PERSONAL INFORMATION**

|  |  |
| --- | --- |
| Child’s full name |  |
| Address |  |
| Postcode |  |
| Gender |  |
| DOB |  |
| Parent/carer name |  |
| Relationship to child |  |
| NI number (parent) |  |
| Contact telephone number(s) |  |
| Email Address  **(Please write clearly in capital letters)** |  |

**FUNDING INFORMATION**

|  |
| --- |
| Unfunded/additional hours = £9 per hour.  Does your child qualify for 30 hour funding? **Yes/No**  If yes, reference No: ……………………………………………………………………………………………………… |

**SESSIONS REQUESTED You can select up to 4 full days and 1 afternoon.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Monday**  **08:50-15:20** | **Tuesday**  **08:50-15:20** | **Wednesday**  **08:50-15:20** | **Thursday**  **08:50-15:20** | **Friday**  **08:50-15:20** |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Monday**  **12:20-15:20** | **Tuesday**  **12:20-15:20** | **Wednesday**  **12:20-15:20** | **Thursday**  **12:20-15:20** | **Friday**  **12:30-15:20** |
|  |  |  |  |  |

**JOINING INFORMATION**

|  |
| --- |
| Ideal start date:  Are there siblings in Nazeing Primary:  Medical conditions, allergies, intolerances, special needs, disabilities? Please state |

Please return completed form to: [admin@nazeingpreschool.co.uk](mailto:admin@nazeingpreschool.co.uk)