**APPLICATION FORM**

Full Name of Child…………………………………………………………………… Date of birth…………………………………………

Male/Female ……………………………………………………………………………………………………………………………………………

Name of Parents………………………………………………………………………………………………………………………………………

Address……………………………………………………………………………………………………………………………………………………

Telephone Number (Home)…………………………………………….. (Mobile)………………………………………………………….

Email Address ………………………………………………………………………………………………………………………………………….

Required start date……………………………………………………………………………………………………………………………………

Sessions required

Am Session: 7.30am - 1.00pm

PM Session: 1.00pm – 6.30pm

Please tick as appropriate:-

|  |  |  |
| --- | --- | --- |
| Day | AM | PM |
| Monday |  |  |
| Tuesday |  |  |
| Wednesday |  |  |
| Thursday |  |  |
| Friday |  |  |

Additional Information………………………………………………………………………………………………………………………………

NHS Employee? YES/NO

£50.00 non-refundable booking fee to secure a nursery place enclosed? YES/NO