



10.3 Application to Join

Name of Child:			Date of Birth:		
Parent(s)/Guardian(s) name(s):					
Address:					
Telephone Number:			Mobile Number:		
Email Address:					
Start Date Required:					
Sessions Required (please tick):					
	Mon	Tues	Wed	Thurs*	Fri
9.15 - 12.15					
Lunch 12.15 - 1.00					
1.00-3.00					

* Thursday sessions are set aside for those children who will be starting school the following year.

Please add my child's name to your waiting list. I understand that completion of this form does not guarantee a place for my child in the Pre-School and that I will be notified as soon as a suitable place has become available. I will transfer £50 Via the bank to cover administration costs (only charged if you are paying for non-funded sessions). I will email manager@wendensambopreschool.co.uk to notify them once my payment is made.

I understand that if my child is offered a place and I accept it, on admission further personal information and family details will be required for your records. I will need to show my child's original birth certificate for staff to verify for their records. Staff do not keep a copy of this on file. If I no longer need the place, I will inform you as soon as possible and I understand that you will not retain my details on this application form.

Signed _____ Date _____

Please return to: The Manager Wendens Ambo Pre-School (CIO) Royston Road Wendens Ambo, CB11 4JX	Bank details Account: 53070468 sort code: 30-97-24 Reference: Surname
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