**APPLICATION FORM**

**BIRCHWOOD PRE-SCHOOL**

Please complete and return this form to us at [www.birchwoodpre-school.co.uk](http://www.birchwoodpre-school.co.uk)

Name of Child……………………………………………..Date of Birth……..……………….

Name of Parent/s…………………………………………………………………………………

Address………………………………………………………………………………………………………………………………..............................................Postcode…………………………..

Contact Telephone No/s…………………………………………………………………………

E-Mail:……………………………………………….………………………………………………..

Preferred Starting Age: (please indicate)

|  |  |  |  |
| --- | --- | --- | --- |
| **Aged 2****(Funded Place)** | **Aged 2** **(Non-Funded Place** | **Aged 3****(Non-Funded Place)** | **Aged 3 years 3 months (Funded Place)** |
|  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Mon** | **Tues** | **Weds** | **Thurs** | **Fri** |
| AM  | AM  | AM  | AM  | AM  |
|  PM  | PM  | PM  | PM  | PM  |

Anticipated days required (Please indicate)

This is guidance and we appreciate that parents may need to change days from those indicated. We will try to meet these requirements; however parents must be aware this is not always possible due to the popularity of the pre-school

Does your child have any additional needs that we should be aware of (this does not reflect on your child being allocated a place at Birchwood Pre-school

|  |
| --- |
|  |

I give/do not give permission for my child’s personal details to be added to our secure ‘Famly’ Signed: …………………….

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Office use only

Date form received………………… Child due to start……………………

School Year……………