



APPLICATION FOR A NURSERY PLACE

1: CHILD

First name: _____

Surname: _____

Date Of Birth: _____

2. PARENT/CARER

Name: _____

Address: _____

Locality: _____

County: _____

Post Code: _____

Tel No. _____

3:Details

Days / Sessions required: _____

Start Date: _____

Other Comments: _____

4:Deposit

A deposit of one month's fees will be required to secure your child's place at the nursery (please contact us to confirm the exact deposit amount, as this will depend on the number of sessions required)

The deposit is NON-REFUNDABLE if you later decide not to take the place. It is only refunded when your child leaves, providing there are no fees outstanding. Please note a deposit is NOT required until your child's place is confirmed.

Signatures

Date: _____

Parent Signature: _____

For Staff use - Staff Signature: _____