



# Nacton & Bucklesham Under 5's

## Application to join

Name of child \_\_\_\_\_ Date of birth \_\_\_\_\_

Name(s) and address(es) of parent(s) making the application:

Postcode	Tel.	Postcode	Tel.
Email			Email

I/We would like \_\_\_\_\_ to start attending at this setting

\*as soon as possible; or from \_\_\_\_\_ (date)

We would like our child to attend on the following days/sessions:

\*Mon am; Tues am Tues pm(open to 4 year olds only); Wed am; Thurs am; Fri am

If we find that we no longer need the place, we will inform the setting as soon as possible.

Signature of parent(s)

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Tear off the following part to return to the parent(s)

A place will be available for \_\_\_\_\_ (child's name)

\* on \_\_\_\_\_ (date)

\* or; we will notify you when a place becomes free.

Signed on behalf of the setting \_\_\_\_\_

Name \_\_\_\_\_ Job title \_\_\_\_\_

\*Please delete whichever is not applicable.