

## Application Form for a place at the under three's day-care centre

Please fill out the details below and bring a £50 deposit with this form to secure a place on the waiting list.

Child details: Name ..... date of birth .....

Ethnicity ..... Home Language ..... First Language .....

Sessions needed ..... date sessions to start .....

**Parents/Guardian Details**

Name .....		
Home Address.....		Postcode .....
Contact Number.....		

**Medical Details**

Child's Medical Practice.....		
Address.....		Postcode .....
Does your child have special learning/medical needs? Any allergies or special diets?		

**We cannot guarantee a place before .....**

I am paying a non refundable deposit to secure my child's place on the waiting list. I will be contacted by the day-care manager when a place is available. If I accept the place then the £50 deposit will be deducted from my first month's invoice. If I choose not to accept the place or go elsewhere before the above date then I forfeit the deposit.

Signed parent ..... date ..... Signed Nursery staff ..... date .....



### **ALEXANDRA UNDER THREE'S CENTRE**

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