## Application to join

Grove Pre-school
Grove Sports Centre, St Mary's Grove, Nailsea BS48 4NQ
Correspondence address 22 St Mary's Park, Nailsea, BS48 4RW
01275857614/07749240004 info@grovepreschoolnailsea.co.uk

Personal details			
First name(s) of child:			
Surname of child:		Date of birth:	
Full address:			
		Postcode:	
Parent/carer name (1):			
Relationship to child:			
Full address (if different):			
		Postcode:	
Daytime/work tel:	Home:	Mobile:	
Parent/carer name (2):			
Relationship to child:			
Full address (if different):			
		Postcode:	
Daytime/work tel:	Home:	Mohile:	

Session request							
Preferred start date: _							
Please tick the sessions you v	vould like your	child to attend	d:				
Morning	□ Monday	□ Tuesday	□ Wednesday	□ Thursday	□ Friday		
Afternoon	□ Monday	□ Tuesday	□ Wednesday	□ Thursday	□ Friday		
This application places your c becomes available. Please no requested sessions immedia	ote that compl						
Once your child is offered a pl family details are required for copy made for our file.							
If you find that you no longer r you no longer need the place Notice).							
Signed parent/carer (1):			Date:				
Signed parent/carer (2):			Date:				
Please be advised that this a conditions. By signing this agree to these terms and co	document, yo		-	•			
Tear off the following part to re	eturn to the pa	rent(s)					
A place will be available for			(child's name)				
* on	(dat	e) * or; we \	will notify you whe	n a place becor	mes free.		
Signed on behalf of the provid	ler:						
Name:		Job titl	e:				

<sup>\*</sup>Please delete whichever is not applicable.