|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **10.3 Application to join**  *CC logo* | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | (name of provider) | |
| Name of child | | | |  | | | | | | | | Date of birth | | | |  | | | | |
| Name(s) and address(es) of parent(s) making the application: | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | |  | | | | | | | |
| Postcode | | |  | | Tel. |  | | | | | | Postcode | | |  | | Tel. | | |  |
| 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: | | | | | | | | | | | | | | | | | | | | |
| \*Monday am / pm; Tuesday am / pm; Wednesday am / pm; Thursday am / pm; Friday am / pm | | | | | | | | | | | | | | | | | | | | |
| If we find that we no longer need the place, we will inform the setting as soon as possible. | | | | | | | | | | | | | | | | | | | | |
| Signature of parent(s) | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | |  | |  | | | | | | | |
| *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 provider | | | | | | | | |  | | | | | | | | | | | |
| Name | |  | | | | | | | | | | Job title | | |  | | | | | |

\*Please delete whichever is not applicable.

**Reviewed April 2016**