

Application to join Brington and Whilton Pre-school

Name of child _____ Date of birth _____

Name(s) and address of parent(s) _____

Postcode _____ Telephone _____

I/We would like _____ to start attending at this setting

*as soon as possible

*from _____ (date)

* Please delete whichever is not applicable.

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

Signature of parent _____

Admission to _____ **(name of setting)**

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

* on _____ (date)

*We will notify you when a place becomes free.

Signed for the setting _____

Name _____ Title _____

*Please delete whichever is not applicable.