

Merry-Go-Round



Registered Charity No. 1039722

10.3 Application to join

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: _____

Mobile: _____

Session request

Preferred start date: _____

Please tick the sessions you would like your child to attend:

- | | | | | | | | | | | |
|-------------------|--------------------------|--------|--------------------------|---------|--------------------------|-----------|--------------------------|----------|--------------------------|--------|
| [Breakfast] | <input type="checkbox"/> | Monday | <input type="checkbox"/> | Tuesday | <input type="checkbox"/> | Wednesday | <input type="checkbox"/> | Thursday | <input type="checkbox"/> | Friday |
| [Morning] | <input type="checkbox"/> | Monday | <input type="checkbox"/> | Tuesday | <input type="checkbox"/> | Wednesday | <input type="checkbox"/> | Thursday | <input type="checkbox"/> | Friday |
| [Lunch] | <input type="checkbox"/> | Monday | <input type="checkbox"/> | Tuesday | <input type="checkbox"/> | Wednesday | <input type="checkbox"/> | Thursday | <input type="checkbox"/> | Friday |
| [Early afternoon] | <input type="checkbox"/> | Monday | <input type="checkbox"/> | Tuesday | <input type="checkbox"/> | Wednesday | <input type="checkbox"/> | Thursday | <input type="checkbox"/> | Friday |
| [Late afternoon] | <input type="checkbox"/> | Monday | <input type="checkbox"/> | Tuesday | <input type="checkbox"/> | Wednesday | <input type="checkbox"/> | Thursday | <input type="checkbox"/> | Friday |

This application places your child on [our/my] waiting list. [We/I] will contact you as soon as a suitable place becomes available. **Please note that completion of this form does not guarantee a place for your child,**

Once your child is offered a place and you accept it, on admission further personal information and family details are required for our records. Your child's birth certificate is required at this point with a copy made for our file.

If you find that you no longer need the place, please inform [us/me] as soon as possible. **Should you decide you no longer need the place we will not retain the details on this application form (see our Privacy Notice).**

Signed parent/carer (1): _____

Date: _____

Signed parent/carer (2): _____

Date: _____

Please be advised that this application form and offer of a place is subject to [our/my] terms and conditions provided to you. By signing this document, you acknowledge that you have read, understood and agree to these terms and conditions.

For office use only:

Deposit paid: _____ Date paid: _____

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.