

APPLICATION FORM TO JOIN
ST PAUL'S (CROFTON) PRE-SCHOOL

NAME OF CHILD
DATE OF BIRTH
NAME(S) OF PARENT(S)
ADDRESS OF PARENT(S)
POSTCODE
HOME TELEPHONE NUMBER
MOBILE NUMBER
EMAIL ADDRESS
Date you wish your child to start Pre-School, and any specific days requested.
A £30 deposit is required to secure your child's place on the waiting list, which is non-refundable and includes the registration fee. You can pay by cash, cheque or BACS. Our bank details are: Sort Code 40-35-30 Account Number 81180924. If you decide you no longer want a place at the Pre-school, it would be appreciated if you could let us know as soon as possible, so the place can be offered to another child on the waiting list.
I confirm that:- 1) I will inform the pre-school as soon as possible should the place not be required. 2) I have received and read a copy of the Admissions and Settling In Policy. 3) Once my child has a place at the Pre-school, I will give six weeks notice when I wish my child to leave, or reduce sessions attended, or I will pay the fees due for six weeks.
Signature of Parent Date