

10.3 Application to Join



Memorial Avenue, Shiplake, Oxon, RG9 4DW

Tel: 0118 940 4738

registrar@shiplakevillagenursery.co.uk

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: _____

Email Address _____

Parent/carer name (2):

Relationship to child:

Full address (if different)

Postcode:

Daytime/work tel:

Home:

Mobile:

Email address:

Session request

Preferred start date:

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

(Minimum admission 2 sessions)

Morning (9-12) Monday Tuesday Wednesday Thursday Friday

*Lunch Club (12-1) Monday Tuesday Wednesday Thursday Friday

Afternoon (12-3) Monday Tuesday Wednesday Thursday *CLOSED*

*Lunch club is available to extend morning sessions to 1pm. This can be pre-booked or can be arranged on an ad-hoc basis subject to staffing and numbers for the afternoon session.

Where did you hear about us?

Website Open Day Local Press Poster/Flyer Social Media Word of Mouth

If you are claiming funding via our setting we will need to see your child's birth certificate or passport. Funding is only available from the term after they turn 3years and from the start of a full term only. 30hr funded places are subject to availability and a valid 30hr code. If you have any queries please do not hesitate to contact our Registrar on registrar@shiplakevillagenursery.co.uk

This application places your child on our waiting list. We will contact you as soon as a suitable place becomes available.

Please note:

- Completion of this form does not guarantee a place for your child.
- A place at nursery does not give you an automatic place at Shiplake CofE Primary School.
- Shiplake Village Nursery and Shiplake CofE Primary School operate separate admissions policies.

Once your child is offered a place and you accept it, on admission further personal information and family details are required for our records.

If you find that you no longer need the place, please inform us as soon as possible.

I enclose my (non-refundable) registration fee of £25 and understand this fee is to cover administration costs. Please make cheques payable to 'OCC'. I confirm I have received and read the Shiplake Village Nursery Early Years Prospectus.

Signed parent/carer (1): _____ Date: _____

Signed parent/carer (2): _____ Date: _____

Please return form to:

Registrar, Shiplake Village Nursery,

Memorial Avenue, Shiplake, Oxfordshire, RG9 4DW

For office use only:

Deposit paid: _____ Date paid: _____