



DITTON LODGE COMMUNITY NURSERY

APPLICATION FORM

Child's name:

Date of Birth: Male/Female

Address:

Postcode:

Email.....

Telephone number: Mobile number:

Does she/he have allergies/medical conditions? Yes/No

If yes, please provide details including any medication required:

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Any additional needs?

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What language(s) do you speak at home?

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Please indicate what days and times you would prefer your child to attend. (If no preferences please state).

	Mon	Tues	Wed	Thurs	Fri
8.40 am-11.40 am (am only)					
8. 40 am-12.10 pm (am with lunch)					
12.10 pm-3.10 pm (pm only)					
8.40 am-3.10 pm (all day)					

I understand that children are admitted by the length of time on the waiting list, as long as the child will be 2 years old at the time of starting.

Signed: Date

Parents name (Block capitals and Mr/Mrs/Miss/Ms)

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