**PLANET TINY DAY NURSERY**

**WAITING LIST**

# Date………………………

**(Please complete in full)**

|  |  |
| --- | --- |
| Parent 1 Name   Address  Postcode Tel Personal email address   | Parent 2 Name Address   Postcode Tel Personal email address   |

Child’s Full Name: Gender Date of Birth:

Places required from:……………………………………

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MON  | TUE  | WED  | THU  | FRI  |
| Full day 8am - 6pm  |  |  |  |  |   |
| Half session AM 8am - 1pm  |   |   |   |   |   |
| Half session PM 1pm - 6pm  |   |   |   |   |   |
|  |   |   |   |   |   |

Any relevant information with regard to your requirements. ( i.e. Flexibility)

|  |
| --- |
| Has/does your child attended any other childcare provision if yes please give details    |
| How did you hear about Planet Tiny Day Nursery: |

**We will inform you as soon as possible when your application for a place has been successful. You must confirm by returning the relevant paperwork within one week of receiving your confirmation that you still wish to take up the place. If you do not then the offer of a place may be withdrawn.**

**At confirmation a deposit charge and registration fees will be required to hold the place for your child.**

|  |  |  |
| --- | --- | --- |
| Signature Parent 1  |  | Signature Parent 2  |