**Child place request form**

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| --- | --- |
| Parents name |  |
| Parent contact number |  |
| Email address |  |
| Childs name |  |
| Childs dob |  |
| Preferred start date |  |
| Days required and hours |  |
| Funding  |  |

Please fill in your request and we shall get back to you with our availability, once we have confirmed the availability you shall be requested to pay £250.00 deposit which will secure your child’s place, deposit is refunded when you leave our nursery.