

Tile Kiln Church, Robin Way, Chelmsford CM2 8AU *Tel:* 01245 269691 *E-mail:* fledgelings@fledgelingspreschool.co.uk

Manager – Mrs K Smith

Application Form

Name of Child				
Date of Birth		Male/Female		
Name of parents/carers veresponsibility Name: Home contact No.: Mobile: Name: Home contact No.: Mobile: Mobile:	vho hold parental	Address: Post Code:		
Email address:				
Ethnic origin:				
Home language:		Second language:		
Is your child attending an	other playgroup or nurser	y as well?	Y/N	
Ideally, which days do you anticipate you will require? – Please circle:				
Mornings:	Mon Tue V	Ved Thurs Fri		
Afternoons:	Mon Tue V	Ved Thurs		
All day:	Mon Tue V	Ved Thurs		
Name of School your child will attend:				
How did you hear about the Fledgelings Preschool:				
I/we wish to apply for a place at the Fledgelings Preschool (if we find we no longer need the place, we will inform the preschool as soon as possible)		ASAP	From:	
Deposit of £10.00		Paid	Unpaid	

Please bring along your child's birth certificate when returning this application so that we can take a copy	Copy taken:	
Signature of parent/carer:		
Date:		

This information will be treated as confidential and will not be available to anyone outside your family. Thank you for helping us by completing this form. Please return it to the manager or secretary. If you have any queries, please do not hesitate to contact us on 01245 269691.