## Application to join _____ (name of setting)

Name of child _____  Date of birth _____

Name(s) and address(es) of parent(s) making the application:

| | |
|---|---|
| | |
| Postcode          Tel. | Postcode          Tel. |

I/We would like _____ to start attending this setting at:

*as soon as possible; or from _____ (date)

We would like our child to attend on the following sessions:

*Monday am / pm;  Tuesday am / pm;  Wednesday am / pm;  Thursday am / pm;  Friday am / pm

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

Signature of parent(s)

| | |
|---|---|
| | |