



Maidensbridge Pre-school Application Form

Please complete this application form and bring it to the school office along with the following documentation:

Proof of your home address (e.g., utility bill)

Proof of your child's date of birth (e.g. birth certificate)

Date Received:

YOUR CHILD:

Family Name

First Name(s)

Home Address

.....

..... Post Code

Child's Language/s

Child's Nationality

Male Female

Date of Birth

Is your child Looked After (i.e., in the care of a local authority/fostered)? YES / NO

Does your child have a severe and long-term medical need? YES / NO

Do you believe your child has Special Educational Needs? YES / NO

If you have answered yes to any of the above questions, please provide further information on a separate sheet, together with copies of all relevant supporting documentation.

PREFERRED START:

Term after child turns 3.
My 3/4-year-old child is entitled to 15 funded hours of childcare per week. You can check if your child is eligible for 15 hours funding here: <https://www.gov.uk/apply-free-childcare-if-youre-working> or www.childcarechoices.gov.uk
Extended Entitlement Code (if applicable) is:
.....

Term after child turns 3.
My 3/4-year-old child is entitled to 30 funded hours of childcare per week. You can check if your child is eligible for 30 hours funding here: <https://www.gov.uk/apply-30-hours-free-childcare> or www.childcarechoices.gov.uk
Extended Entitlement Code (if applicable) is:
.....

YOUR DETAILS:

Mr/Mrs/Miss/Dr First Name

Surname

Language

Relationship to child
.....

Address (if different to child's)
.....

..... Postcode.....

Contact Telephone Numbers –

1

2

Email Address.....

SignatureDate.....

SIBLINGS:

Please tell us about any other children living in the home who will be attending Maidensbridge Primary School when this child starts:

NAME

DATE OF BIRTH

.....

.....

.....

.....

SESSIONS:

Please use the grid to tell us which sessions you would like your child to attend pre-school.

Each session is 3 hours long:

AM 8.30am – 11.30am

PM is 12.15pm – 3.15pm

If your child receives funding for 15 hours, but you would like them to attend more, you can purchase additional sessions at the cost of £15.00 per session.

Please indicate your preferred session (AM/PM) you require by marking the relevant box with: *F* for funded sessions and *P* for 'paid for' sessions.

If your child receives funding for 15 hours and you are flexible on sessions (AM or PM), please tick here.

	Monday	Tuesday	Wednesday	Thursday	Friday
AM session 08.30am – 11.30am					
PM session 12.15pm – 3.15pm					

Do you require wrap around care for lunchtime (this is an additional cost not covered by the 30 free hours)?

Do you require wrap around care at the start of the school day (available at an additional cost from 7.30am)?

Do you require wrap around care at the end of the school day (available at an additional cost until 5.45pm)?

I declare that all the information I have entered on this form is correct.

Signed Parent / Carer

Date.....