



Application Form

Name of Child.....

Name your child prefers to be known by.....

Child's date of birth.....

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

Name Address	Name Address
Postcode Tel: email Relationship to Child	Postcode Tel: email Relationship to Child

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

Signature of parent(s)

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Please return this application form to join the Pre-school waiting list to:

Haycorns Pre-School, Lucetta Lane, DORCHESTER, DT1 2DD.

FOR PRE-SCHOOL USE ONLY

Date enrolment form received.....

Date acknowledgement email sent.....

Added to waiting list.....

Date session request letter sent.....

Date sessions request returned.....

Date due to start Pre-School.....

Date Confirmation of Place letter and registration forms sent.....

(forms to be returned to Pre-School).