**REGISTRATION FORM FOR A PLACE AT ST JOSEPH’S PRE-SCHOOL**

CHILDS FIRST NAME………………………………………………….……….

SURNAME……………………………………………………………………….

DATE OF BIRTH………………………………………………………...………

PARENT/CARERS NAMEs………………………………………………………

ADDRESS………………………………………………………………………..

…………………………………………………………………………………….

…………………………………………………………………………………….

TEL..………………………………………………………………………………

EMAIL:……………………………………………………………………………

PREFERED DAYS/Hours (Please tick)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|   | Breakfast(8-9am) | AM(9-12) | PM12-3 or 1-4(please circle) | Extra Hr(3-4pm) |
|  Monday |  |  |  |  |
| Tuesday |  |  |  |  |
| Wednesday |  |  |  |  |
| Thursday |  |  |  |  |
| Friday |  |  |  |  |

 (we can’t always guarantee certain mornings/afternoons but we try where we can)

**When are you hoping your child will be able to start?.....................................................**

We can take children from the age of 2 years. Some children are eligible for funding from this age (You can check by filling out a simple form on Bristol Council website) All children are eligible for 15 hours from the term after their 3rd birthday and from Sept 2017 some children may be eligible for 30 hours. Please ask for further details.

Any special needs or requirements your child may have ( e.g. Allergies, health problems, additional needs etc.)…

**If you find that you no longer need the place, please inform us as soon as possible**. Should you decide you no longer need the place we will not retain the details on this application form (in accordance with our Privacy Notice)

Already/hoping to Use this Primary school?………………. Religion……………….……

Signed …………………………………….….. Date……………………………………