Application to join.

Little Acorns Preschool, Stogursey School, Tower Hill, Stogursey, Bridgwater TA5 1PR.

Email: preschool316@educ.somerset.gov.uk

Tel: 01278 732389 Ofsted URN 123839



Full name of child:	Date of Birth:		
Full Address:			
Postcode:			
Parent/Carer (1) name:			
Relationship to child:			
Full Address:			
Postcode:			
Daytime number:	Home number:		
Mobile number:	Email:		
Parent/Carer (2) name:			
Relationship to child:			
Full Address:			
Postcode:			
Daytime number:	Home number:		
Mobile number:	Email:		

Session request				
When would you like to start pres	chool?			
Please tick the sessions you wou	ld like your cl	hild to attend:		
Morning	□ Monday	□ Tuesday	□ Wednesday	□ Thursday
Lunch	□ Monday	□ Tuesday	□ Wednesday	□ Thursday
Early afternoon	□ Monday	□ Tuesday	□ Wednesday	□ Thursday
This application registers your int place becomes available. Please your child. Once your child is of information and family details are point with a copy made for our file Signed parent/carer (1):	e note that confered a place required for	ompletion of and you acce	this form does in this form does in the thick	not guarantee a place for on further personal
— — —				
Signed parent/carer (2):			Date:	
Please be advised that this app terms and conditions. Please r preschool316@educ.somerset.	eturn the co	mpleted forn	n to the prescho	ol or email to
For office use only:				
Deposit paid (if applicable):	Date paid:			
Tear off the following part to return	n to the pare	nt(s)		
A place will be available for				(child's name)
* on	(date) * or; we will notify you when a place becomes free.			
		e) * or; we \	will notify you whe	en a place becomes free.
Signed on behalf of the provider:	(date	e) * or; we \	will notify you whe	en a place becomes free.

^{*}Please delete whichever is not applicable