



# Ferring Funtime Community Pre-school

## 09.1b APPLICATION TO JOIN

Name of Child: ..... Date of birth: ..... Gender: M / F

Address: .....

..... Postcode: .....

Name of Parent/Carer:.....

Contact No: ..... Email: .....

Address if different from above: .....

.....

Please indicate in the table below which sessions you wish your child to attend:

	Monday	Tuesday	Wednesday	Thursday	Friday
<b>Morning</b> 08.50-11.50					
<b>Lunch</b> 11.50-12.50					
<b>Afternoon</b> 12.50-15.20					

I would like my child to start: ..... when they are: ..... years old

This application places your child on our waiting list. I understand that I will be contacted the half term before my child is due to start to inform me about the availability of a place. Please be aware that we are not a feeder pre-school for Ferring C of E School, we are an independent pre-school.

Please note that completion of this form does not guarantee a place for your child.

Once your child is offered a place and you accept it, on admission further personal information and family details are required for our records. Your child's birth certificate is required at this point with a copy made for our file.

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 (see our Privacy Notice).

**I confirm that I have read and understood the Pre-schools Prospectus, Admissions Policy and Fees & Funding Policies. Additional copies are available in hardcopy by request and electronically on our website.**

### PRIVACY NOTICE

#### How the information you provide will be used - General Data Protection Regulations

Any personal information such as name, postal address, telephone number and email address given will only be used to provide a requested service and will not be disclosed to any other third party without your prior permission or unless we are required to do so by law

Sign: .....

Print: ..... Date: .....