

Enrolment form **Start date:**

Child's surname name: D.O.B:

Child's first name: Gender:

Parents names:

Address:

.....

Postcode: Contact number:

Email address: this allows Compton Pre-School to send information via email.

Does your child have any special requirements?

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Please indicate the hours you wish your child to attend:

Monday	9.30 – 12.00	12.00 – 2.30
Tuesday	9.30 – 12.00	12.00 – 2.30
Wednesday	9.30 – 12.00	12.00 – 2.30
Thursday	9.30 – 12.00	12.00 – 2.30
Friday	9.30 – 12.00	CLOSED

I understand that my child is able to attend a variety of hour's morning, afternoon or both.

We will try our best to accommodate your needs, but please be advised that we may not be able to give you all hours requested.

If we do not get enough requests for days and times we may choose not to run these sessions.

If we have too many children registered for the same days and times we will allocate on a first come first served basis.

We would encourage you to access a minimum of two 2 ½ hour sessions for the benefit of your child, providing there are spaces available.

Print name: Date:

Signature: