



# Acorns Community Pre-School

## Application to join

Name of child.....Date of birth .....

(1) Parent/Carer Name	(2) Parent/Carer Name
Relationship	Relationship
Address	Address
Post Code:	Post Code:
Tel No:	Tel No:
Contact Email:	Contact Email:

Please indicate preferred starting date .....

To give you the most convenient hours, please tick **preferred** start/collection times.

	Start time					Collection time				Total hours
	8:30	9:00	9:30	12:00		12:00	2:30	3:00	3:30	
MONDAY										
TUESDAY										
WEDNESDAY										
THURSDAY										
FRIDAY										

**This application places your child on our waiting list. We will contact you as soon as a suitable place becomes available. Please note that completion of this form does not guarantee a place for your child.**

All children are entitled to 15 Hours of Government Funded Childcare starting from the term after their third birthday. Other Childcare funding is available.

Are you eligible for

Two Year Old Free Early Years Education  
30 Hours Extra Funding

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Hours are allocated depending on your child's age and availability of sessions. We recommend children under 3 years start with 2/3 sessions per week allowing us to get to know your child and work towards your eligible hours.

As part of our Registration Process please arrange to visit our setting with your child for a short half-hour Taster Session so that we can meet you and your child, starting our partnership between us and your family.

We also offer a home visit. Please indicate if you would like us visit. Yes No

To help us get to know your child and family, please indicate if any of these apply.

Social Worker	Yes	No
Health Visitor	Yes	No
Doctor	Yes	No
Paediatrician	Yes	No
Dentist	Yes	No

**PTO To Sign**

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. For a payment of £20.00 we provide your child with an Acorns T-Shirt and book-bag, it also gives them access to use Acorns Wellies and ponchos whilst in the setting.

Please be advised that this application form and any offer of a place will be subject to our terms and conditions provided to you as part of our Registration Pack.

If you find 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).

Signed (1)

Date:

Signed (2)

Date:

How did you hear about Acorns? ie friend, neighbour, website \_\_\_\_\_

**For ACORNS to complete**

£20 Payment Received Fee paid: ..... Date Book Bag/T-Shirt issued: .....

Days/Hours offered: .....

Starting Date: .....

Offer Accepted YES ☐ NO ☐

**Two Year Old Free Early Years Education Funding Number:** .....

Date Eligibility Checked: .....

**30 Hours Funding Number** .....

Date Eligibility Checked: .....

Parents National Insurance Number .....

Date of Home Visit.....