



Dunton Village Pre-school and Boomerang Clubs APPLICATION FORM



I wish to register my child for Dunton Village Pre-school and/or Boomerang Clubs. The ideal start date would be:

..... (Pre-school children must be at least 2 years old when they start)
(Boomerang children must be at least 2½ when they start)

Child's Full Name:	Date of Birth:
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Parent's/Guardian Name & Address:

Home Telephone No:	Work Telephone No:
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E-mail address:	Mobile Telephone No(s):
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Confirm receipt of application by Admissions:	Yes:	Not required:
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School you would like your child to attend, or already attends:

If your child has any kind of specific needs/requirements, please outline them below so staff can check in advance that the necessary facilities and/or resources are available.

How did you hear about us? (word of mouth, advert, sibling attended etc.)

Other Relevant Information:

Please indicate your preferred sessions and clubs:

	Pre-school including Lunch Club					Breakfast and After-School Club				
	M	T	W	Th	F	M	T	W	Th	F
Morning 1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning 2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morning 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Transport from/to: _____
Please indicate breakfast drop-off and after-school collection times:

I understand that on returning this form, my child's name will be added to your waiting list and the Admissions Officer will contact me nearer my child's possible start date. If I decide I no longer require a place, I will inform the group as soon as possible.

Parent/Guardian Signature:	Date:
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Please return your completed form to our Admissions Officer:
**Mrs Sue Tunnard, Dunton Village Pre-school & Boomerang Clubs, Dunton Memorial Hall,
Biggleswade Road, Dunton, Beds SG18 8RL**

E-mail: info@duntonvillagepreschool.co.uk