Tudhoe Moor Nursery School

Waiting List Form

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| CONTACT DETAILS |
| Child’s Name: |
| Child’s Date of Birth: |
| Address: |
| Postcode: |
| Name of Parent/Carer: |
| Telephone Number: |
| Email: |
| PREFERENCES (Please circle or highlight) |
| What type of place are you applying for? 2 Year Old 3 Year Old |
| If you are applying for a **2** year old place are you applying for…Funded Working funded Paying Unsure |
| If you are applying for a **3** year old place are you applying for…15 hours 30 hours Unsure |
| Preferred start date:  |
| When would you like your child to attend?Morning / Afternoon / All day / No preferenceOther:Please note we cannot guarantee there will be availability for your preferred sessions. A member of staff will be in touch to discuss options with you once this form has been received.  |
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| Date of Application: | Signed: |