



Registered Charity No: 802275

Waiting List Request Form

If you would like to place your child on our waiting list – please complete and return this form to us. (This does not guarantee a place at Heather Playgroup – only that your child’s name is on our waiting list.)

Childs Name:

Date of Birth:

Gender M/F:

Child’s Address:

Name(s) and address(es) of Parent(s) / Guardian(s)making the application:

Name:	Name:
Address:	Address:
Postcode:	Postcode:
Tel:	Tel:
E-mail:	E-mail:

I would like my child to start at age: 2 (if available) 2½ (if available) 3
(please tick box required)

Are you entitled to 2 year old funding? Yes/No If yes – please supply your code:

Will you be using the extra 30 hours free entitlement? Yes / No

Where did you hear about Heather Playgroup?

Should you decide you no longer need the place, please let us know. We will not retain the details on this application form (see our Privacy Notice).

Signature of parent(s)/Guardian(s)

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Staff Use Only:

Date form received:

Date admission forms sent:

Staff initials:

Start date 2½:

Start date 3:

Start date FE: