Shenfield Day Nursery

11 Hutton Road, Shenfield CM15 8LA Tel: 01277 211212

Parent Guardian Details

Name:		Name:	Name:		
Address:		Address:	Address:		
Postcode:		Postcode:	Postcode:		
Tel Home:			Tel Home:		
Tel Work:			Tel Work:		
Tel Mobile:		<u>Tel Mobile</u>	Tel Mobile:		
Email:		Email:	Email:		
<u>Child's Details</u>					
Name:	ame: D.O.B (or E.D.D)				
Days and Starting Date Required					
Monday	<u>Tuesday</u>	Wednesday	Thursday	<u>Friday</u>	
Start Date:					
Anticipated School Start Date/Name of School if known:					
Please complete and return to the Nursery Manager. Please note: The Nursery cannot guarantee a place or your required start date and that any offer of a Nursery place will be made in writing, generally 4-6 months before the start date. At this time, a deposit will be required to secure the place.					
Therefore, no offer or guarantee of a place and/or start date has been made until you have received this offer in writing and made a deposit.					
By ticking this box, you are consenting to us continuing to hold and process your data and sending you Nursery related information.					
Date of Application:					