

## Tell us about your child

| Child's name:                         |               |            |
|---------------------------------------|---------------|------------|
| Gender:                               |               |            |
| Date of birth:                        |               |            |
| Ethnicity:                            |               |            |
| Child's home add                      | lress:        |            |
| Your child's m                        | nedical req   | uirements  |
| Does your child h                     | ave any healt | h needs?   |
|                                       | Yes 🔲         | No 🔲       |
| If yes, please deta                   | il what these | are:       |
| Special dietary red                   | quirements?   |            |
|                                       | Yes           | No 🔲       |
| If yes, please let u                  | s know what   | these are: |
| Any allergies?                        | Yes           | No 🔲       |
| If yes, please deta                   | il what these | are:       |
| For more information Maple Cross, ple | ase contact   | us on      |

Footsteps-Nursery.com/Maple-Cross

## Footsteps Maple Cross Application form

Thank you for your interest in registering your child at Footsteps Pre-School Maple Cross.

Please fill out the below form, scan and email it to us at: Maplecross@footsteps-nursery.co.uk

We look forward to hearing from you!

| 1st parent's or carer's name:                                       |
|---|
| Home telephone:  Daytime telephone:  Mobile number:  Email address: |
| Daytime telephone:  Mobile number:  Email address:                  |
| Mobile number:Email address:  |
| Mobile number:Email address:  |
| Email address:  |
|   |
| (   |
|   |
|   |
|   |
| 2nd parent's or carer's name:                                       |
| Relationship to child:  |
| Home telephone:   |
| Daytime telephone:  |
| Mobile number:  |
| Email address:  |
| Home address (if different from child):                             |
|   |
|   |
|   |
|   |

|   |   |  | When would yo  | ou like your cili | lu lo start at |  |
|---|---|--|--|-------------------|----------------|--|
| In the unlikely eve   | _   | •  | Footsteps? dd / mm / yyyy  |                   |                |  |
| please provide us   |   |  | Confirming   | your child's      | s nlace        |  |
| Emergency contac  |   |  | Confirming your child's place I enclose a non-refundable payment of £50.00 for the starter pack. Payment of fees will commence from the start date given above, unless arranged otherwise with minimum of one months notice. Our starter pack includes a polo T-shirt and a  |                   |                |  |
| Emergency contac  | ct number:  |  |  |                   |                |  |
| Relationship to ch  | ıild:   |  |  |                   |                |  |
| Doctors name:   |   |  |  |                   |                |  |
| Doctors contact n   | umber:  |  |  |                   |                |  |
| Doctors Address: _  |   |  | Footsteps book   | c bag.            |                |  |
| Doctors Address.  |   |  | Signed:  |                   |                |  |
|   |   |  | Print:   |                   |                |  |
|   |   |  | Date: dd / mm / yyyy   |                   |                |  |
|   |   |  |  |                   | 3333           |  |
| Your child's se   | ssions - Ter  | m time on                                  | ly   |                   |                |  |
| Please tick the bel   | ow hoves to in  | dicate which                               | sassions vou woi   | uld lika:         |                |  |
|   |   |  | Wednesday  |                   | Friday         |  |
| Pre-School Sessions   |   |  |  |                   |                |  |
| Morning Session<br>9.00am - 12.00 noon  |   |  |  |                   |                |  |
| <b>Lunch Session</b><br>12.00 noon - 12.30pm  |   |  |  |                   |                |  |
| Afternoon Session   |   |  |  |                   |                |  |
| 12.30pm - 3.30pm  |   |  |  |                   |                |  |
| 12.30pm - 3.30pm  Flexible Sessions   | Monday  | Tuesday                                    | Wednesday  | Thursday          | Friday         |  |
| Flexible Sessions Specific sessions   | Monday  | Tuesday                                    | Wednesday  | Thursday          | Friday         |  |
| Flexible Sessions   | Monday  | Tuesday                                    | Wednesday  | Thursday          | Friday         |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon)   | Monday  | Tuesday                                    | Wednesday  | Thursday          | Friday         |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon) Please write in specific  | Monday  | Tuesday                                    | Wednesday  |                   | Friday         |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon) Please write in specific times in day boxes  Funding Are you claiming 2 year of   | old's place funding?  | ? Yes, if so, pleas                        | se answer below.   | No 🗆              |                |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon) Please write in specific times in day boxes  Funding Are you claiming 2 year of f yes, please let us know                         | old's place funding?  | ? Yes, if so, pleasg: 15 hours             | se answer below.   | No 🗆              |                |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon) Please write in specific times in day boxes  Funding Are you claiming 2 year of f yes, please let us know f part funding, how man | old's place funding?<br>vif you are claiming<br>ny hours are you app                      | ? Yes, if so, pleasg: 15 hours plying for? | se answer below. and an analysis and a second secon | No 🗆              |                |  |
| Flexible Sessions Specific sessions (e.g. 9.00am - 1.00pm, 9.00am - 12.00 noon) Please write in specific times in day boxes  Funding Are you claiming 2 year of f yes, please let us know                         | old's place funding?<br>vif you are claiming<br>ny hours are you app<br>ds NHS number for | ? Yes, if so, pleasg: 15 hours plying for? | se answer below.  30 hours Part  | No 🗆              |                |  |

Your child's start date



- 2 years to 5 years - £6.00 per hour

**Emergency contact details** 

## **Footsteps Pre-School - Maple Cross**

toast and a drink - £1.00

If you have any questions about your application, please call us on **01923 710818**, email us on **Maplecross@footsteps-nursery.co.uk** or visit our website at **Footsteps-Nursery.com/Maple-Cross** 

- Hot lunch available - £2.90 (provided by Hertfordshire County Council, please ask a member of staff for a menu.)