

## Tell us about your child

Child's nan	าe:	
Gender:	Female	Male 🔲
Date of birt	th:	
Child's hon	ne address:	
Your chile	d's medical re	quirements
Does your c	hild have any hea	lth needs?
	Yes	No 🗌
If yes, pleas	e detail what the	se are:
Special diet	ary requirements?	?
	Yes	No 🔲
If yes, pleas	e let us know wha	at these are:
Any allergie	s? Yes	No 🔲
If yes, pleas	e detail what the	se are:
steps, visit Footsteps-	nformation about our website at nursery.com/linton-buzzard	

## Little Footsteps Application Form

Thank you for your interest in registering your child at Little Footsteps Explorers Pre -School.

Please fill out the below form, scan and email it to us at:

LeightonBuzzard@footsteps-nursery.co.uk

We look forward to hearing from you!

ist pair	ent's or carer's name:
Relatio	nship to child:
Home t	elephone:
Daytim	e telephone:
Mobile	number:
Email a	ddress:
Home a	address (if different from child):
2nd par	ent's or carer's name:
Relatio	nship to child:
Relation	nship to child:elephone:
Relation Home t	nship to child: elephone: e telephone:
Relation Home t Daytim Mobile	nship to child: elephone: e telephone: number:_
Relation Home t Daytim Mobile	nship to child: elephone: e telephone:
Relation Home t Daytim Mobile Email a	nship to child: elephone: e telephone: number:_
Relation Home t Daytim Mobile Email a	nship to child:elephone:e telephone:enumber:enumber:eddress:eddress:

Emergency co	ntact detail	ls	Your child's start date When would you like your child to start at Footsteps? dd / mm / yyyy  Confirming your child's place I enclose a non-refundable payment of £50.00 for the starter pack. Payment of				
In the unlikely even	_	•					
Emergency contact							
Emergency contact							
Relationship to ch			fees will commence from the start date given above, unless arranged otherwise				
Doctors name:							
Doctors Address:			with minimum of one months notice. Ourstarter pack includes a polo T-shirt and a Footsteps book bag. Signed:				
			Print:				
			Date:	dd / mi	m / yyyy		
Please tick the bel specific hours pleat Term Time Only  Morning Session 8am/9am - 12pm  Afternoon Session 12pm - 3pm/4pm  Full Session 8.00am - 4.00pm		Tuesday	Wednesday	uld like, but if y  Thursday	rou have  Friday		
Full Session 9.00am - 3.00pm							
re you claiming place fure you claiming over 9 mre you claiming 3-4 years re you claiming 3-4 years Extended	nonth old's funding	? No Yes Yes Yes If ye	es, is this 15 hours  N.I. num	or 30 hours	2 year old funding		

Your child's start date



Little Footsteps Explorers Pre-School
If you have any questions about your application, please email us on LeightonBuzzard@footsteps-nursery.co.uk or visit our website at Footsteps-nursery.com/little-footsteps-leighton-buzzard