



# Holmes Chapel community pre-school



## ENROLMENT FORM.

CHILD'S FULL NAME (please print) \_\_\_\_\_

SEX \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

PARENT/GUARDIAN'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTCODE \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

Please tick the sessions you would prefer ESTIMATED START DATE \_\_\_\_\_

	Mon	Tues	Wed	Thurs	Fri
9-12					
9-1 Includes lunch club					
12-3 Includes lunch club					

We currently charge an hourly fee of £6.00 per hour.

Your child is eligible for 15 Free Early Education Entitlement (FEEE) hours per week from the term after their third birthday.

Does your child attend any other nursery or pre-school? Yes / No

If so, how many hours per week do they attend? \_\_\_\_\_

Does your child have any special needs? (Health or medical /special educational needs/involvement with social services?  
This information is treated as confidential)

Please indicate any professionals involved and any other information that is relevant.

How did you find out about our Pre-School? (This helps when advertising) \_\_\_\_\_

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**Please complete and return this form to our Administrator:  
Mrs Dawn Caine-Bryant, 13A Westmorland Terrace, Holmes Chapel CW4 7EE,  
Telephone: 07808 723811**

N.B. This section is for Office use only

Date received: \_\_\_\_\_ Prospectus issued: \_\_\_\_\_ Pre-School visit: \_\_\_\_\_

Reaches 2: \_\_\_\_\_ Start date: \_\_\_\_\_ P/T: \_\_\_\_\_

Welcome pack sent: \_\_\_\_\_ Invoice sent: \_\_\_\_\_ Documents returned: \_\_\_\_\_

Holmes Chapel Community Preschool, Holmes Chapel Primary School, Middlewich Road,  
Holmes Chapel, Cheshire, CW4 7EB  
Ofsted Registration: URN305107 Registered Charity Number: 1017112  
Members of the Preschool Learning Alliance