



**Burwell  
Early Learners**

**APPLICATION FORM**

**CHILD DETAILS:**

Child's First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Surname: \_\_\_\_\_

D.O.B: \_\_\_\_\_ Preferred Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Nationality: \_\_\_\_\_ First Language: \_\_\_\_\_ Male/Female: \_\_\_\_\_

**YOUR DETAILS:**

Your Surname: \_\_\_\_\_ Title: \_\_\_\_\_ First Name: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ Tel No: \_\_\_\_\_

Mobile No: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address (if different to above): \_\_\_\_\_

\_\_\_\_\_

Postcode: \_\_\_\_\_

Do you have the following for this child? (please circle)

Legal Responsibility: Yes / No Parental Responsibility Yes / No

**SESSION DETAILS**

Please indicate below your preferred sessions and start date:

	Monday	Tuesday	Wednesday	Thursday	Friday
AM Session 9.00-12.00					
LUNCH session 12.00-12.30					
PM session 12.30-3.30					

\*\*please note that the Dolphin Room is only open for AM sessions\*\*

This Application places your child on our waiting list. We will contact you as soon as a suitable place becomes available. **Please note that completion of this form does not guarantee a place for your child.** If your chosen sessions are unavailable, alternatives will be offered where possible.

Once your child has been offered a place and you accept it, on admissions further personal information for both your child and yourself will be required for our records. Your child's birth certificate will also be required at this point, we will keep a copy of this on our file.

Please do not hesitate to contact us if you require any further information.

By signing this form I understand that I/we are able to withdraw consent at anytime on non-compulsory data. I confirm that I have received, read and understood the privacy notice.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Parent/Carer: \_\_\_\_\_