



Little Bishop Street  
St Pauls  
Bristol  
BS2 9JF

Tel (0117) 903 0337 Fax (0117) 3772361

**A NON-REFUNDABLE ADMINISTRATION CHARGE OF £20 IS  
PAYABLE WITH THIS APPLICATION.  
THIS CHARGE DOES NOT GUARANTEE A PLACE**

**Fee Paying Day Care Application Form**

**Todays Date**

Name of Child:	Address	Tel No: Parent 1:
DOB:		Parent 2:
Please circle Boy                      Girl	Post Code	Home No:
Parents Name:	Parent 1 DOB:	
	Parent 2 DOB:	
	Email address:	
Please let us know if any of your other children have been with us before (Y/N) :	Please state Ethnicity and Religion of:	
If yes, please give child's name/s :	Parent 1	
	Parent 2	
	Child	
Disabilities. Do you consider either of the carers or child to have a disability? Please circle		
Parent 1    Yes                  No                  Prefer not to say		
Parent 2    Yes                  No                  Prefer not to say		
Child        Yes                  No                  Prefer not to say		
Are you working/attending college? Please delete as appropriate	How soon do you need Day Care to start	
What hours do you work/attend college?	Start Date:	
If attending college, will the fees be paid by the college/parent	If college fees are paid by the college, we will require a letter of authorisation	
Are you in receipt of Working/Family Tax Credit?	YES	NO
Has 2 year old check been completed?		
Will you be eligible for the free funded 12 hours in the future?		



