

**Pippins Preschool Waiting List**

Please fill in this form to request a place at Pippins Preschool and return by post or by hand.

We’ll then confirm we’ve received this form and will contact you to arrange a visit.

|  |  |
| --- | --- |
| Child’s full name: |  |
| Likes to be known as:  (if applicable) |  |
| Date of birth: |  |
| Parents’ names: |  |
|  |
| Home address: |  |
| Home phone number: |  |
| Mobile phone number: |  |
| Email address 1: |  |
| Email address 2: |  |
| Date you would like  your child to start: |  |
| *Children may start aged 2 years, 6 months.*  *Funding is available from the term after they turn 3. More information to follow!*  *Invoiced sessions are charged at £15 per session, with fees due a half term in advance.* | |
| Any other information:  (e.g., sibling previously attended) |  |
| Any additional needs:  (e.g., special needs, disability, English as a second language, other professionals involved) |  |

I understand that this form does not guarantee my child a place at Pippins Preschool.

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

Deliver by hand to Pippins Preschool, entrance via Henry Morris Road. Phone for directions: 01223 833248

or by post to: Pippins Preschool, Lynton Way, Sawston, Cambridgeshire CB22 3EA