# Tandridge Village Pre School Application

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| Child’s Name: |  | | | |
| Child’s Date of Birth: |  | | | |
| NHS Number: |  | | | |
| Parent’s Name/s: |  | | | |
| Address: |  | | | |
| Post Code: |  | | | |
| Telephone Number |  | | | |
| Mobile |  | | | |
| Email address: |  | | | |
| Would you be interested in joining the Management Committee? | Yes |  | No |  |
| Is your child currently attending another Nursery or Pre-School? | Yes |  | No |  |
| Name of other Pre-school attended. |  | | | |
| Do you intend to continue with this place as well as a place at Tandridge Pre-School if you are offered a place? | Yes |  | No |  |
| For TVPS to complete: |  | | | |
| School Year: | Distance from Pre-School: | | | |
| Confirmation of place letter sent: | Reply by: | | | |
| Sessions offered: | Start date: | | | |
| Deposit Received: |  | | | |

I enclose a non-refundable registration fee of £40.00.

The registration fee is not applicable if your child is 3 at the time of application or is eligible for FEET funding. If you wish to register your child on our waiting list and it is more than 10 weeks prior to them starting, then the registration fee will apply.

Please pay by either cash, cheque or BACS, see the details below;

Cheques payable to: **Tandridge Village Pre-School**

BACS payments: **HSBC bank, Sort code - 403540, Account number – 51136631. Please use your child’s surname as a reference**

Cash – **In a named enveloped dropped in directly to the Pre-School in opening hrs**

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| Please return the form for the attention of :  Tandridge Village Pre-School Administrator  c/o St Peter’s C of E Infant School  Tandridge Lane, Tandridge  Surrey RH8 9NN | or drop in when the pre-school is open |