**Teddies Application Form**

Please fill out the following details for our records so we are able to add your child/children to our waiting list.

Please keep us updated of any changes.

Child’s Full Name ……………………………………… DOB……………………………………………..

1st Parent/Legal Guardian/Carer Name…………………………………………………………………

2nd Parent/Legal Guardian/Carer Name……………………………………………………………….

Address……………………………………………………………………………………………………………………….

Post Code………………………………..

Telephone……………………………….

Email…………………………………………………………………………………

Allergies/Intolerances/Medical Conditions………………………………………………………..

**Please complete this section to indicate which sessions you would like for your child/children.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Monday  Am 09.00 – 1200  PM 12.00 - 15.00 | | Tuesday  Am 09.00 – 1200  PM 12.00 - 15.00 | | Wednesday  Am 09.00 – 1200  PM 12.00 - 15.00 | | Thursday  Am 09.00 – 1200  PM 12.00 - 15.00 | |
| am | pm | am | pm | am | pm | am | pm |

Fees:- £5.50per hour for non funded children or additional hours for funded children.

Consumable Fee of £1.50 per session.

Signature………………………………………… Date………………………………..