

Chiddingstone Nursery School CIO

Chiddingstone Castle
Hill Hoath Road
Chiddingstone
Kent
TN8 7AD



APPLICATION FORM

Child's Full Name:				
Date of Birth:				
Name of Parents/Guardians:				
Address				
Postcode:				
Contact Telephone Numbers:	(H)			
	(M)			
E-mail address:				
When would you like your child to start?	<input type="checkbox"/> As soon as possible <input type="checkbox"/> From (please give date)			
Please indicate which sessions you would like your child to attend?	Monday am	<input type="checkbox"/>	Monday pm	<input type="checkbox"/>
	Tuesday am	<input type="checkbox"/>	Tuesday pm	<input type="checkbox"/>
	Wednesday am	<input type="checkbox"/>	Wednesday pm	<input type="checkbox"/>
	Thursday am	<input type="checkbox"/>	Thursday pm	<input type="checkbox"/>
	Friday am	<input type="checkbox"/>		
Signed:			Print Name:	
Date:				
<p>To secure a place on our waiting list, we require a non-refundable £40 administration fee per child (deductible from your first invoice if your child/ren is eligible for Government Funding on commencement at the Nursery). This does not guarantee you an offer of sessions initially requested. Please return the completed Application Form, together with £40 administration fee, to the Nursery Leader at the above address.</p> <p>Please make cheques payable to "CHIDDINGSTONE NURSERY SCHOOL CIO" or BACS to: Account No. 42115418 Sort Code: 52-41-12 with reference AdFee/[Surname of child].</p> <p>We will confirm we have added your child to our waiting list by e-mail once we have received both the completed Application Form and administration fee.</p>				

All of the information collected in this form is necessary and relevant to an offer of a place at the Nursery. We will use the information provided to add your details to our waiting list only. We rely on the lawful basis of legitimate interest to process the information provided by you in this form. For further information, please see our [Privacy Notice](#).