

**BRAILSFORD PRE-SCHOOL WAITING LIST REGISTRATION**

Child's Name .....

Date of Birth .....

Address.....  
.....

Post Code .....

Telephone.....Mobile Telephone .....

Main/Carer (Contact Name) .....

We take children from their second birthday. Please mention when you would like your child to start at Brailsford Pre-school.

Preferred start date: .....

Preferred days to attend:

Date form Returned .....

Signature .....

Anything else you feel we should know: .....

.....  
.....

The registration on the waiting list is effective once this form is received

We will write to you nearer the time with more information and details of sessions. We look forward to your child starting with us. If in the meantime you wish to know more about us then do not hesitate to phone, visit or look at our website at [www.brailsfordpreschool.co.uk](http://www.brailsfordpreschool.co.uk)

If you would like to be informed of all Brailsford events by email please fill in your email address here:.....

How did you find out about Brailsford Pre-School? (Please circle as appropriate)

- Word of mouth - You had a previous child in the setting - Website - Advertising -

Other (please specify):.....

Please return to us during a morning session, email to [brailsfordpreschool@gmail.com](mailto:brailsfordpreschool@gmail.com), or post to Brailsford Pre-School, 1 Barrington Close, Kirk Langley, Derbyshire, DE6 4NB