**Little Drummers Pre-school**

Waiting list number:

**Waiting List form**

|  |  |  |
| --- | --- | --- |
| **Name of child:** | **Date of Birth:** | **Gender:** |
| **Religion:** | **Nationality:** | **Preferred language:** |
| **Address:** | | |
| **Home telephone number:** | | **Email address:** |
| **Medical Needs:** | **Links with other professionals:** | **Where did you hear about us?** |
| **Mothers name:** | **Address (if different from above):** | |
| **Mobile number:** | | |
| **Fathers name:** | **Address (if different from above):** | |
| **Mobile number:** | | |
| **Name of other contact eg Grandparent** | | **Address:** |
| **Telephone:** | |

**If any of your contact details change please let us know, otherwise we may not be abel to get in touch with you about your child’s place.**

**I understand completing this form places my child on the waiting list and does not guarantee a place in this setting.**

**Signed……………………………………………………. Date…………………………………. Staff initial……………………..**