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**APPLICATION FORM FOR ADMISSION TO BUTTERFLIES AT HIGHFIELD**

Please provide your child’s birth certificate or passport when returning your application form.

PLEASE PRINT IN CAPITAL LETTERS

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| --- | --- |
| Child’s First Name/s: | Child’s Surname: |
| Child’s Date Of Birth: | Male/Female: |
| Is he/she a ‘Looked After’ child? Yes/No(In Foster Care or on a care order) | Siblings in school: Yes/No |
| Parent/Carer’s Full Name: | Parent’s Date of Birth: | Parent’s National Insurance No: |
| Full Address: |
| Telephone Number: | Email Address: |

Please tick which sessions you would like *(maximum of 15 hours ie 5 sessions)*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| Breakfast8am-9am |  |  |  |  |  |
| 9am-12noon |  |  |  |  |  |
| 12noon-3pm |  |  |  |  |  |
| 3pm-4pm(Paid for) |  |  |  |  |  |

The Breakfast will be between 8am – 9am and will cost an additional £7.38

Please tick the box to agree to pay this when your child accesses breakfast.

The Lunch will be between 12pm - 1pm and will cost an additional £3.00
Please tick the box to agree to pay this when your child accesses lunch.

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| Please tick if you will be claiming 2 year old funding for your child’s place or paying for the sessions.  2 year old funding 🗖 Paying 🗖**Please note:- 2 year old funded children can start the term after their 2nd birthday (spaces permitting)** **and paying children will start as soon as they turn 2 (spaces permitting)** *If you are claiming 2 year old funding, you MUST provide all the necessary evidence along with your 2 year old funding ‘AF’ reference number or Golden Ticket.**Thank you. AF Reference Number ...........................................*The above information is true to the best of my knowledge and belief. I understand if a place is offered on the basis of any false information given by me, the place can be withdrawn at any time by the Local Authority. |

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| --- | --- |
| Parent/Carer Signature | Date |