

St Michael's Church Pre-School Application Form

Child's Full Name.....DOB.....

Male or Female.....

Parents Names.....

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Address.....

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Postcode.....Tel No.....

Email Address.....

*Office use only*

Application Received.....

Place Offered.....

Sessions Accepted.....



REPLY POSTCARD

Date.....

St Michael's Church Pre-School and Nursery .....

Acknowledges receipt of your application for a .....

Pre-School place for your child. ....

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