

Enquiry Form

Thank you for enquiring about a place for your child at Little Champs Day Nursery.
Please fill in the form below to help us with your enquiry.

Once a place becomes available on your requested day/s, we will issue you with a registration form, which will need to be returned to secure your child's place.

Child's Name: _____

Parent's Name: _____

Relationship to Child: _____

Current age of child: _____

Child's Date of Birth: _____

Male/Female (please indicate)

Home Address: _____

Post code: _____

Telephone Number- Mobile: _____

Telephone Number-Home: _____

Email Address: _____

Requested days and sessions:

Please tick in the boxes the sessions you would like for your child.

Please note that we **do not** offer 'flexi' days.

We also recommend a **minimum of 2 sessions** for each child.

Monday am	Tuesday am	Wednesday am	Thursday am	Friday am
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monday pm	Tuesday pm	Wednesday pm	Thursday pm	Friday pm
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Requested Start Day and Date: _____

Please help us with our marketing by answering the following questions:

How did you find out about us? (Please indicate)

- Web search
- ECC/Little Champs Website
- Leaflet
- Recommended by friend/family member
- Other, please state _____

Signed: _____

Print name: _____

Date: _____

Thank you for filling this form in. We will contact you as soon as your requested place becomes available.

In the meantime, if you wish to book a visit with your child, please do not hesitate to contact us to book a time.

01933 442639
rebecca@reachoutcommunitychurch.co.uk

Staff member receiving the form: _____

Please pass to the Management once completed. Thank you.

