Blundellsands Kindergarten

1 Blundellsands Road West

Liverpool L23 6TF

 Tel: 0151 924 7795

**Request for enrolment or a place on our waiting list**

Thank you for your enquiry about Blundellsands Kindergarten.

Please complete this application form and email it to:

blundellsandskind@gmail.com

Surname of child……………………………………………………………………………

Forename(s) of child…………………………………………………………………………

Address ……………………………………………………………………...........

Postcode……………………………………………

Telephone number………………………………..

Mobile number…………………………………….

Date of Birth…………………………….

Date you wish your child to commence Kindergarten…………………………………….

Do you wish your child to attend full or part time………………………………………….

Please indicate: *Mon am/pm Tue am/pm Wed am/pm Thu am/pm Fri am/pm*

Are there any special circumstances you wish Kindergarten to be made aware of? *Yes No*

If yes, please state on a separate sheet. Such information will be treated in strictest of confidence.

Many thanks.

There is £50 registration fee. Our bank details are as follows:

The Co-operative bank

P.O.Box 250

Delf House

Southway

Skelmersdale

WN8 6WT

Account name: Blundellsands Kindergarten Reg. Ch 1047898

Account number: 65061411

Sort code: 08-92-99