## THE FIELDS NURSERY SCHOOL REGISTER OF INTEREST FORM



Please print clearly, using capital letters.

Office	Use:
	On waiting List
	Date received:

Privacy notice: By filling in this form you are consenting the Nursery can contact you by email/phone regarding your child's place on our waiting list and of other events at the Nursery. Your information will be kept securely and you can withdraw anytime by emailing office@thefields.cambs.sch.uk

Your child's details									
First Name									
Last Name									
Gender		Boy		Girl		Prefer not to say			
Date of Birth	DD / MM / YYYY								
	•						_		
Your Details									
Title (Mr/Mrs/Miss/Ms/Dr etc)									
First Name									
Last Name									
Date of Birth	DD / MM / YYYY								
Relationship to child									
National Insurance Number (for nursery funding)									
Phone number									
Email address									
Address Please remember to tell us if you change	Firs	t line							
your address/contact details	Sec								
	Tov	wn/City							
		st Code							
I wish to register my interest for	a pla	ce for my	child a	nt The Fi	elds	Nursery School			
Signed (Type name for electronic signature)									
Today's Date:	DD	/ MM	/ Y)	/YY					

The Fields Nursery School Galfrid Road, Cambridge CB5 8ND

Telephone: 01223 518333

Email: office@thefields.cambs.sch.uk

Preferred start date:	DD/MM/YYYY								
Session Times	Breakfast 8:00-8:30	Morning session 8:30-11:30	Lunch 11:30-12:30	Afternoon session 12:30-15:30	Extra ½ hou 15:30-16:00				
Monday	£6.50		£11.00		£4.00				
Tuesday	£6.50		£11.00		£4.00				
Wednesday	£6.50		£11.00		£4.00				
Thursday	£6.50		£11.00		£4.00				
Friday	£6.50		£11.00		£4.00				

	PPLYING FOR A FUNDED TWO YEAR OLD PLACE	
enefit entitling Free Twos	Tick	if applicable
	Universal Credits provided annual net income is less than £15,400	
amilies who are in receipt of one of th ollowing -	Income Support	
	Income Based Job Seekers Allowance	
	Income related Employment & Support Allowance	
	Child Tax Credit	
	OR Working Tax Credit and income less than £16,190	
	Guaranteed element of State Pension Credit	
	Support under part VI of the Immigration & Asylum Act 1999	
nildren who have been adopted from Loca	al Authority care or are looked after by a Local Authority	
nildren who have left care through a speci	al Guardianship or child arrangements order	
nildren who are in receipt of Disability Livi	ng Allowance	
nildren with an Education, Health and Car	e (EHC) Plan	
nildren who are getting help from the Early Su	pport team, and who have complex needs requiring ongoing specialist	
referred session: Morning	Afternoon No preference	
Office use only		
Notes		

**Chargeable hours** 

**Breakfast** − ½ hour care charge plus meal

Morning/Afternoon sessions – Your funded hours if eligible or charged at £8.00 per hour

**Lunch** – 1 hour care charge plus a hot meal

Extra (15:30-16:00) – ½ hour care charge

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