****

**Enquiry Form**

Thank you for enquiring about a space for your child at Little Flowers Nursery. Please complete the attached form and return to us at office@littleflowersnursery.com

|  |  |
| --- | --- |
| Child’s Name: |  |
| Date of Birth: |  |
| Address: |  |
| Parent/ Carer Name: |  |
| Contact telephone number: |  |
| Email: |  |
| Days/times required: |  |
| Requested start date: |  |
| Comments: |  |

..................................................................................................................................................................

For office use only:

|  |  |
| --- | --- |
| Date of enquiry: |  |
| Confirmed start date: |  |
| Room allocation: |  |
| Confirmed sessions: |  |