**Cappoquin Childcare, Mill Street, Cappoquin, Co Waterford**

**Form 1 - Registration 2022/23**

**Email: cappcomdev@gmail.com Phone: (058)52746**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date you wish your child to start: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please indicate with an X on the following table the days and area you wish your child to attend:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | **Mon** | **Tue** | **Wed** | **Thu** | **Fri** |
| **Creche****6 mts – 2 yrs** | **Full Day 8.00am – 6.00pm** |  |  |  |  |  |
| **Creche****6 mts – 2 yrs** | **Part time 8.00am – 1.00 pm** |  |  |  |  |  |
| **Creche****6 mts – 2 yrs** | **Part time 1.00pm – 6.00pm** |  |  |  |  |  |
| **Toddlers****2 yrs – 3 yrs** | **Full Day 8.00am – 6.00pm** |  |  |  |  |  |
| **Toddlers****2 yrs – 3 yrs** | **Part time 8.00am – 1.00pm** |  |  |  |  |  |
| **Toddlers****2 yrs – 3 yrs** | **Part time 1:00pm – 6.00pm** |  |  |  |  |  |

**Comments/Additional requirements: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This form is to be returned, with completed Early Childhood Ireland Child’s Record and with completed direct debit form, to the Cappoquin Childcare facility if you wish to have your child considered for a place.**

**If booking a place in the crèche including toddler room, the completed forms must be submitted to the childcare facility at least 2 months in advance of the proposed start date.**

**We accept that this is an application form and the completion does not guarantee a place. We understand that the Cappoquin Childcare will allocate places in accordance with their approved Admissions Policy and will contact us if and when a place is available and advise you of your fee.**

**We also understand by completing this form that we are agreeing to payment of direct debit system operated by Cappoquin Community Development Company CLG.**

**Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Notes:

1. Only 3 babies under 1 year will be accepted at any one time and preference will be given to babies who attend for full week.
2. In all instances preference will be given to children who attend for full week and to children of siblings already in the service.