



SESSION AMMENDMENT FORM

Child's Full Name	
Child's Date of Birth	
Parent/ Guardian Name(s)	
Date Change Starts	

Please note that one month's notice is required for changes to attendance patterns.

Regular Attendance Pattern

Please circle the sessions your child attends on a regular basis.

Monday		Tuesday		Wednesday		Thursday		Friday	
am	pm	am	pm	am	pm	am	pm	am	pm

If your child is included in the Nursery Education Funding Scheme, do they attend:

Term time only	or	Full year
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New Attendance Pattern

Please circle the new sessions you wish your child to attend on a regular basis.

Monday		Tuesday		Wednesday		Thursday		Friday	
am	pm	am	pm	am	pm	am	pm	am	pm

If your child is included in the Nursery Education Funding Scheme, do they attend:

Term time only	or	Full year
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Signature:

Print name:

Date:

OFFICE USE ONLY		
Received by	Initials:	Date:

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OFSTED registration no EY417791

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