66a. Session Amendment Form

PART A: Temporary session amendment form

Please complete this form if you require a temporary amendment to your child’s sessions at **Little Plums Day Nursery.**

Name of parent ..........……………………………………………………………………….

Name of child …………………………………………………………………………………

Room …………………………………………………………………………………………..

Date(s) if amended sessions ………………………………………………………………

Additional session(s) required

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Mon | Tues | Wed | Thurs | Fri |
| Full day |  |  |  |  |  |
| Morning  |  |  |  |  |  |
| Afternoon |  |  |  |  |  |
| Breakfast  |  |  |  |  |  |
| Lunch  |  |  |  |  |  |
| Tea |  |  |  |  |  |
| Other (give details) |  |  |  |  |  |

Cost of additional sessions ..........…………………………………………………………

Signed …………………………………………… Date ……………………………………

**Office use only**

Room head authorisation ……………………………………………..…………………….

Additional staff required (to meet ratios)? Yes/No

Staff name ……………………………………………………………………………………

Input into nursery administration system (tick when complete)

on (date) ……......

Input by……………………………………… Position ……………………………………..

Payment method …………………………………………………………………………….

PART B: Permanent session amendment form

Please complete this form if you require a permanent amendment to your child’s sessions at **Little Plums Day Nursery.**

As per our terms and conditions, one month’s notice must be given if the number of sessions is to be reduced.

Name of parent ..........……………………………………………………………………….

Name of child …………………………………………………………………………………

Room …………………………………………………………………………………………..

Start date for amended sessions

…………………………………………………………………………………………………..

Please complete the sessions’ form with the new sessions required and attach it to this amendment form.

Signed …………………………………………… Date ……………………………………

**Office use only**

Manager authorisation ………………………………………………………….

Additional staff required (to meet ratios)? Yes/No

Staff name …………………………………………………………………………………….

Input into nursery administration system (tick when complete)

on (date) ……......

Input by ……………………………………Position ………………………………………

**Agreement**

I agree to abide by the terms and conditions and policies and procedures of **Little Plums Day Nursery** which I have read and fully understand.

Signed……………………………………….. Date …………………………………………

Print name…………………………………........…………………………………………….

Relationship to child ………………………………………………………………………….

Signed…………………………………………Date………………………………………….

Print name…………………………………........…………………………………………….

Relationship to child ………………………………………………………………………….

Office use only

Input into nursery administration system (tick when complete)

on (date) ……......

Input by ………………………………………………………………………………………..

Position ………………………………………………………………………………………..

Actual start date ………………………………………………………………………………

Room …………………………………………………………………………………………..

Key person ……………………………………………………………………………………