** Butterfly Nursery School**

**Church Road**

**Horne**

**Surrey**

**RH6 9LA**

**01342 843655**

**Permanent Session Amendment Form**

Please complete this form if you require a permanent amendment to your child’s sessions at Butterfly Nursery School

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

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

Start date for amended sessions………………………………………………………………………………......

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| Full day |  |  |  |  |  |
| Morning |  |  |  |  |  |
| Afternoon |  |  |  |  |  |

(Please insert times required)

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

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

Office use only

Staff member form handed to……………………………………………………………………………………

Date………………………………………………………

Additional staff required (to meet ratios) yes/no

Input into nursery administration system (tick when complete) Date……………………………………

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