#  Trinity College Day Nursery Application Form

**Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact No: W\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **M\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ D.O.B/E.D.D\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(If your child is not born just leave blank)**

**Boy /Girl**

**Preferred Start Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |
| --- | --- |
| **Student name** | **Staff Name** |
|  |  |
| **Student Number** | **Staff Number** |
|  |  |
| **Title of Course** | **Department** |
|  |  |
| **Course Finish date** |  |
|  |  |

**Deposit must be paid by Bank draft or Cheque, made payable to Trinity College and given to**

**Lesley ( ) or Sonya ( ). (20-euro deposit for students and 30-euro for staff) (Cash is not accepted)**

**I understand that the deposit is refundable if I decide to take my child off the waiting list.**

**Parent’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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

**Places are extremely limited so we would recommend that you look at other childcare options.**

**The bank details are as follows;**

**Bank Name: Bank of Ireland**

**Bank Address: College Green,**

**Dublin 2, Ireland.**

**Account Name: TCD No.1 Account.**

**Account No.: 10027952**

**Sort Code: 90-00-17**

**IBAN: IE92 BOFI 9000 1710 0279 52**

**SWIFT Code: BOFIIE2D**

**Ref: 1855 Name.**