

| Provider Name:                      | Yew Tree Childcare |
|-------------------------------------|--------------------|
| Child's Full Name:                  |                    |
| Child's D.O.B:                      |                    |
| Parent's Full Name:                 |                    |
| Parent's D.O.B                      |                    |
| Parent's National Insurance Number: |                    |
| 30 Hour Eligibility Code:           |                    |
| Home Address:                       |                    |

Parent / Carer / Guardian with Legal responsibility declaration: Declaration: I (name).....

Of (address)

Confirm that the information that I have provided is accurate and true. I agree that the

information I have provided can be shared with the local authority and Department for Education, who will access information from other government departments to confirm your child's eligibility for 30 hour funding.

| Parent/Carer/ Guardian with legal responsibility Name:      |
|---|
| Parent/Carer/ Guardian with legal responsibility Signature: |
| Childcare Provider Name:                                    |
| Childcare Provider Signature:                               |
| Date:   |