BANGOR UNIVERSITY

NORMAL SITE HOLYHEAD ROAD BANGOR GWYNEDD LL57 2PZ

TEL: 01248388383

EMAIL: tirnanog@bangor.ac.uk



EMAIL. umanogu	oangor.ac.uk				
		WAITING	<u>G LIST</u>		
Child's name:					
Date of Birth:					
Address:					
Post code:					
Parent's Name(s):					
Tel. No:					
Email:					
Desired Start Date: Days and sessions r	equired:				
Mon am pm	Tues am pm	Wed am pm	Thurs am pm	Fri am pm	
	Session	n times: am (8am –	1pm) / pm (1pm – 6	ópm)	
BU employee: YES	S / NO				
Student: YES	NO If yes, Col	lege and course deta	ils:		
Should you cancel the by The purpose of this form	booking this deposit is not make it is not make to help us plan and	on-refundable. If start d provide for future requi	ate is delayed, the fees rements at Tir na n-Og	refunded in your second Nexpected must be paid reg Daycare Centre. Session on the waiting list of Tir n	gardless. fees are available
OFFICE USE ONL	Y DATE REC	EIVED:			
		BABYROOM	0-18 MONTHS O	LD	
		TODDLER R	OOM 1 ½ -2 ½ Y	EARS OLD	

PLAYROOM 2 1/2 -4 YEARS OLD