

# parent registration



please complete and return to:

parent registration  
Cheshire Childcare Vouchers  
83a Earlsway  
Chester  
CH4 8AZ

Only complete Parent 2 details if your spouse/partner would also like to apply for vouchers

## household

address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

are you claiming child tax credit Y/N

telephone \_\_\_\_\_

email \_\_\_\_\_

## parent 1

name \_\_\_\_\_

employer \_\_\_\_\_

employer's address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

employer's telephone number \_\_\_\_\_  
\_\_\_\_\_

salary \_\_\_\_\_

amount you'd like to claim each month in vouchers \_\_\_\_\_  
\_\_\_\_\_

personnel contact \_\_\_\_\_

preferred method of communication - ie telephone/email/post etc \_\_\_\_\_  
\_\_\_\_\_

## parent 2

name \_\_\_\_\_

employer \_\_\_\_\_

employer's address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

employer's telephone number \_\_\_\_\_  
\_\_\_\_\_

salary \_\_\_\_\_

amount you'd like to claim each month in vouchers \_\_\_\_\_  
\_\_\_\_\_

personnel contact \_\_\_\_\_

preferred method of communication - ie telephone/email/post etc \_\_\_\_\_  
\_\_\_\_\_



### child 1

name \_\_\_\_\_

date of birth \_\_\_\_\_

number of days in childcare \_\_\_\_\_

cost per day \_\_\_\_\_

childcare provider \_\_\_\_\_

address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

telephone \_\_\_\_\_

contact \_\_\_\_\_

preferred method of communication - ie  
telephone/email/post etc

\_\_\_\_\_

### child 2

name \_\_\_\_\_

date of birth \_\_\_\_\_

number of days in childcare \_\_\_\_\_

cost per day \_\_\_\_\_

childcare provider \_\_\_\_\_

address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

telephone \_\_\_\_\_

contact \_\_\_\_\_

preferred method of communication - ie  
telephone/email/post etc

\_\_\_\_\_

### child 3

name \_\_\_\_\_

date of birth \_\_\_\_\_

number of days in childcare \_\_\_\_\_

cost per day \_\_\_\_\_

childcare provider \_\_\_\_\_

address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

telephone \_\_\_\_\_

contact \_\_\_\_\_

preferred method of communication - ie  
telephone/email/post etc

\_\_\_\_\_

### child 4

name \_\_\_\_\_

date of birth \_\_\_\_\_

number of days in childcare \_\_\_\_\_

cost per day \_\_\_\_\_

childcare provider \_\_\_\_\_

address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

telephone \_\_\_\_\_

contact \_\_\_\_\_

preferred method of communication - ie  
telephone/email/post etc

\_\_\_\_\_