|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Center** | | | **Centre Contact** | |
|  | | |  | |
| **E-mail Address** | | | **Phone Number** | |
|  | | |  | |
| **Detail Address for Delivery (Street, Town, City, Country, Post Code)** | | | | **Expected Opening Date** |
|  | | | |  |
| **Planned Age Group** | | **Planned Number of Classroom** | | **Planned Number of Children** |
|  | |  | |  |
| **Room Details** | | | | |
| **Classroom** | **Number of Children** | | **Children’s Age Group** | |
| Room 1 |  | |  | |
| Room 2 |  | |  | |
| Room 3 |  | |  | |
| Room 4 |  | |  | |
| Room 5 |  | |  | |
| Room 6 |  | |  | |
| Room 7 |  | |  | |
| Room 8 |  | |  | |
| Room 9 |  | |  | |
| Room 10 |  | |  | |
| …… |  | |  | |
| **Any additional requirements?** | | | | |
|  | | | | |