## Part 2: To be completed once subscribed as a member to the Professional Association for Childcare & Early Years (PACEY)

Please complete the document below in full & return to Kara Kershaw, Child Care Business Development Officer, Early Years & Childcare Team, Integrated Services Team, Heart of the Valleys Integrated Centre, High Street, Blaina. NP13 3BN

Name: .....

Address: .....

.....

Contact Telephone Number: .....

## **Declaration by CSSIW registration Inspector**

I hereby confirm that:

- 1. An application for registration has been made with CSSIW and is being processed.
- 2. The essential & desirable items listed within this application are required for the registration of the applicant as a childminder.

Signed:	
Name (please print):	

## Expenditure Proforma

Part 3: Please complete the tables below & provide receipts/invoices where required.

Description	Price	Receipt / Invoice

CYPOP5 Course