

# Baby Peep

Discover how opportunities you give your baby early on help with their future development. In this five week course we'll show you how to support their development with songs, rhymes and play ideas.

This course has been designed to support; parent's understanding of child development and well being, parent child attachment & provide parents ideas to develop the home learning environment. The course includes a weaning session led by the health visiting team. Please see overleaf for booking criteria.

**To book a space or refer a family please complete the form overleaf and return to the children's centre reception.**

**Courses start on 18th January, 8th March  
and 26th April  
Fridays 2.00-3.30pm**



## **Somerset Nursery School and Children's Centre**

157-159 Battersea Church Road

SW11 3ND

020 7223 5455

ccadmin@somerset.wandsworth.sch.uk



**Somerset Children's Centre Wandsworth**



[www.somerset.wandsworth.sch.uk](http://www.somerset.wandsworth.sch.uk)

### Baby Peep Space Enquiry

Baby Peep is a 5 week course designed to support; parent's understanding of child development and well being, parent child attachment & provide parents ideas to develop the home learning environment.

Courses run 6 times a year (please see poster or timetable for the next start date).

If you wish to attend one of our courses (or are a professional working with a family you feel may benefit) please complete the below enquiry form.

Please note: Due to limited spaces, places will be allocated based on level of need and children's centre target criteria (copies of target criteria available on request). Your space will be confirmed via telephone no later than the **Monday before** the course commences. If you are not allocated a space you will be placed on the reserve list and contacted if a space becomes available. Depending on the information below we may need to contact you for further details to ensure we are able to provide the correct level of support.

<b>Family Details</b>							
Parent Name							
Address							
Postcode		Telephone Number					
Child Name		D.O.B					
<b>Referrer Details</b> (Please leave blank if this is a self-referral)							
Referrer Name		Agency					
Telephone		Email					
<b>Course Criteria</b> (please tick all you feel that apply)							
1st Time Parent		Low Mood/PND		Parental Disability/ Mental health		Child Disability	
Overcrowding at home		Looking for support Bonding		Advice wanted on child development		Isolation/desire to widen support network	
Young Parent (U19)		Young Parent (U26)		Previous/current involvement with social care		No recourse to public funds.	

Please return this form by hand to the Somerset Children's Centre Reception or via email to [Ccadmin@somerset.wandsworth.sch.uk](mailto:Ccadmin@somerset.wandsworth.sch.uk).