

Nursery Admission Form

Today's Date:
Pupil Details
Full Name:
Surname:
Date of Birth:
Male / Female:
Address:
Post Code:
Mobile Telephone Number:
Email Address:
SEN or Support Needs;
Medical Information for your child: ie Asthma etc:
Parent/Carer Information:
Name:
Does your child have a brother/sister already attending the school? Yes or No If yes please give details, Name & Class

Please indicate which session your child would prefer

(PLEASE NOTE THIS ISNT GUARANTEED)

AM Nursery Sessions – 8.30am to 11.30am

Or

Are you entitled to Full Time Nursery Place – Yes or No – 8.30am – 3.00pm 30 hrs Code & National Insurance Number will be required:_____