**NURSERY ADMISSION FORM**

|  |
| --- |
| ***Name of child:*** |

|  |
| --- |
| ***Date of Birth:*** |

 **Gender: Male Female**

|  |
| --- |
| ***Name of parent(s)/Carer(s):***  |

|  |
| --- |
| ***Address:******Postcode:*** |

|  |
| --- |
| ***Home tel no: Mobile:******Email:*** |

No

Yes

|  |  |  |
| --- | --- | --- |
| ***Is this child in the care of the Local Authority or accommodated by the Local Authority*** (i.e. a “looked after child”)? |  |  |

***Does your child:***

No

Yes

|  |  |  |
| --- | --- | --- |
| ***Have a brother or sister in the school at the time of admission?*** |  |  |

 If ‘Yes’ please give name ………………………………………………………………

No

Yes

|  |  |  |
| --- | --- | --- |
| ***Have a special medical and/or social need(s)?*** |  |  |

 If ‘Yes’, please give details ……………………………………………….……………..

Signed …………………………………………………………. Date ………………………………

 Parent/Care