

RISHWORTH NURSERY APPLICATION FORM

PARENT / LEGAL GUARDIAN 2

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Proposed Start Date into Nurse	γ
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1 YOUR CHILD

Surname of Child		
First Name(s)	Preferred Name	
Nationality	Date of Birth	Gender
Religion	First Language	
Primary Address		
	Post Code	
Have you registered your child at any other pursery a	ad if so which?	

Have you registered your child at any other nursery and if so, which?

PARENT / LEGAL GUARDIAN 1

Title	Title
First Name	First Name
Surname	Surname
Day Time Tel No.	Day Time Tel No.
Mobile No.	Mobile No.
Email	Email
Address (if different to the address given in section 1)	Address (if different to the address given in section 1)
Post Code	Post Code
Occupation	Occupation

2 OTHERS WITH PARENTAL RESPONSIBILITY

Title	First Name
Surname	
Address (if different to the address of	ibove)
Relationship to child	

3 CONNECTIONS WITH THE SCHOOL

Please detail any family member attending the School, applying for entry or other connections with the School.

4 MORE ABOUT YOUR CHILD

Please provide us with details of any medical conditions, health problems or allergy affecting your child; any learning difficulty, or special educational need of your child, as well as any behavioural, emotional and / or social difficulty of your child.

5 SESSIONS

Please indicate below the sessions that you would like your child to attend. Please note that we require 4 weeks' notice of any changes although flexibility will be given where possible in emergency situations.

8.30am to 11.30am	Monday	Tuesday	Wednesday	Thursday	Friday
11.30am to 12.30pm (lunch time)					
12.30pm to 3.30pm					

6 NOTES

Early registration is recommended. Applications will be considered in the order they are received. Offers of places are subject to availability and the admission requirements of the School at the time offers are made. A copy of the School's *Terms and Conditions* will be supplied on request.

Please note that a Registration Fee of £50.00 is payable when this form is returned.* When returning this form, we will also require a copy of your child's birth certificate.

7 DECLARATION

I / We request that our child named above is registered as a prospective pupil.

I / We understand that the Nursery (through the Head of Heathfield, as the person responsible) may obtain, process and hold personal information about me / us which may include financial information provided by me / us or by any licensed credit reference agency or information contained in any court orders, petitions or proceedings.

I / We understand that the Nursery may also obtain, process and hold personal information about our child which may include sensitive information such as medical details, and we consent to this for the purposes of assessment, and if a place in later offered, in order to safeguard and promote the welfare of the child.

	Parent 1	Parent 2
Name in Full		
Date of Birth		
Relationship to child		
Signature		
Date		

Please return this form to admissions@rishworth-school.co.uk.

*This fee does not need to be paid if the application is for fully funded morning sessions <u>only</u> (children eligible for Early Education Funding for three and four year olds). If additional sessions are subsequently taken, the £50 fee will become payable in addition and will be reflected on the fee invoice at that time.