

Birth Certificate/ Passport seen (name and DOB checked)	Date seen	Seen by



## Langley Green Primary School - Nursery Application Form

Child's First Name ..... Child's Surname.....

Child's Middle Name ..... Child's Preferred Name .....

Child's Date of Birth ..... Child's Gender Male/Female

Address: .....

.....Post Code: .....

Name of any brothers/sisters attending LGPS.....

### Parents or legal guardians:

1) Mr/Mrs/Miss/Ms First Name ..... Surname .....

Relationship to child.....Occupation.....

Address (if different to child) .....

Telephone number..... Email address.....

Date of Birth..... National Insurance Number.....

Signature	
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2) Mr/Mrs/Miss/Ms First Name ..... Surname.....

Relationship to child.....Occupation.....

Address (if different to child) .....

Telephone number..... Email address.....

Date of Birth..... National Insurance Number .....

Signature	
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**Preferred session** (we can't always guarantee that you will get your preferred choice):  
 Please tick: Morning session 8.30am-11.30am  **or** Afternoon session 12.30pm-3.30pm

**Additional Emergency Contacts**

Name	Relationship to child	Telephone number

**ONLY NAMED CONTACTS WILL BE ABLE TO COLLECT YOUR CHILD**

**Dietary requirements (please tick below as required)**

No specific dietary requirements	
Halal only	
Halal only (but allowed fish)	
No beef	
Vegetarian	
Food allergies/Other (Please specify)	

Doctor's Name or Medical Practice .....

Does your child have any medical conditions? .....

Does your child take any prescribed medication? .....

Has your child been referred to:

Portage? YES/NO

Speech and Language? YES/NO

Child Development Centre? YES/NO

Any other service (Please give details) .....

Does your child wear glasses? YES/NO

Has your child attended another Early Years setting, Nursery or child minder YES/NO