



New Hartley First School

Nursery Application Form



Child	
Name of child	
Date of birth	
Address	
Postcode	
Nursery hours required (Please select)	<input type="checkbox"/> 15 hours <input type="checkbox"/> 30 hours
Preferred start date (Please select)	<input type="checkbox"/> Term following child's 3 rd birthday (if space available) <input type="checkbox"/> September following child's 3 rd birthday
Name of sibling in school (if applicable)	
Name of childminder (if applicable)	
Any other relevant information	
Parent 1	
Name	
Address	

Contact telephone number(s)	
Email address	
Date of birth	
National Insurance number	
Parent 2	
Name	
Address	
Contact telephone number	
Email address	
Date of birth	
National Insurance number	
Correspondence	
Correspondence to be sent to	<input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Both