



ALL SAINTS CATHOLIC PRIMARY SCHOOL
APPLICATION FOR ADMISSION TO NURSERY
0151 288 6420/6421

Full Name of Child		
Date of Birth		
Home Address(<i>postcode essential</i>)		
Full Name of Mother		
Address(<i>postcode essential</i>)		
Tel. No's. Home	Mobile	Work
Full Name of Father		
Address(<i>postcode essential</i>)		
Tel.No's. Home	Mobile	Work
Full name of Guardian (if applicable)		

Date and Place of Baptism
Name and Date of Birth of any Brothers and Sisters of Child
Previous Playgroup(s) Attended
Address
Previous Nursery(ies) Attended
Address
Any Health Problems Including Allergies?

During your child’s stay in nursery/school you will be requested to complete permission slips for various events/educational programmes.

We are therefore requesting that you give consent for the following. These will be updated to your child’s file and will ensure inclusion in these programmes in the event that we have not been able to obtain permission or contact you.

Parental consent for *(please tick)*

- Copyright
- Internet Access
- Photograph Student
- Sex Education
- Data Exchange
- School Visits
- Use of Plasters
- Use of Suncream
- School Website
- Publicity

Please note

Admission to our school nursery does not guarantee a place in reception class. In the event of over subscription our school’s admission criteria will be used to determine admission.

Child’s Name.....

Signature of Parent..... Date.....

FOR OFFICE USE ONLY

Proof of Birth Certificate
Proof of Baptism
Date of Entry into School
Date of Entry into SIMMS
U.P.N.