

WARWICKSHIRE COUNTY COUNCIL

APPLICATION FOR ADMISSION TO WELFORD NURSERY SCHOOL

This form is to be completed by the Parent / Guardian and returned to school.

Full Name of Child D.O.B

Address
.....

Postcode

E-Mail Mobile

Email Mobile

Name of Parents
.....

Morning sessions

Afternoon sessions

Full days

Reason for sessions preferred

Any Allergies / Medical Conditions

Signature of Applicant Date

We offer up to 30 funded hours if eligible

Address : Headland Road, Welford on Avon, Warwickshire. CV37 8ER
(01789 750214)

For Nursery prospectus see website at : welfordonavonschool.co.uk