

**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 ..... Tel. No. ....

E-Mail ..... Mobile .....

**Particulars of other children in the family**

Name	Date of Birth	School Attended
.....	.....	.....
.....	.....	.....
.....	.....	.....

Name of Parents .....  
.....

Father's Occupation .....

Mother's Occupation .....

Morning sessions .....

Afternoon sessions .....

Full days .....

Reason for sessions preferred .....

Any Allergies / Medical Conditions .....

Signature of Applicant ..... Date .....

**We currently offer 30 hours free childcare if required**

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

For Nursery prospectus see website at [welfordonavonschool.co.uk](http://welfordonavonschool.co.uk)