

WESSEX PRIMARY SCHOOL
St. Adrian's Close, Cox Green,
Maidenhead, Berkshire, SL6 3AT
Tel: 01628 629607 Fax: 01628 674731
Website: www.wessexweb.org.uk e-mail: wessex@rbwm.org

Headteacher : Mr N Stevens

ADMISSION FORM - NURSERY

Children can be registered from the age of two for nursery. The child's birth certificate and proof of address must be presented at time of registration.

PLEASE COMPLETE BOTH SIDES OF THE FORM IN CAPITAL LETTERS.

For first admission to school please complete a CAF (Common Application Form) which can be obtained from Admissions: Telephone 01628 796782/3/4 or e-mail school.admissions@rbwm.gov.uk

Child's surname: First names:
(please underline or state name used)

Date of birth: Address:

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Post Code:

Position in family: (1/2, 2/2, 3/5 etc.) Telephone:

Ethnic origin: Religion:
(Please state country of origin or ethnic group)

Home/first language:

Full names of parents/guardians (with addresses and telephone numbers if different from above):

Occupation, business address and telephone numbers for contact in an emergency:

Mother:

Father:

Contact name and telephone number if parents cannot be contacted:

Names and dates of birth of other children in family:

a)

b)

c)

d)

Previous Education

Name of Playgroup and date started:

Name of Nursery and date admitted:

Health and Previous Medical History

Name of Medical Practice: Telephone:

Tick if child immunised:

Diphtheria/ Whooping Cough/ Measles/Mumps/Rubella/Tetanus/other

Tick if any concerns such as:

eyesight/hearing/speech problems/allergies/asthma/other

If the allergy is severe e.g. nuts/stings etc. the school will require the correct antidote drug.

Other Relevant Confidential Information

Please indicate if married/separated/divorced/single/widow(er)/with partner.

If separated/divorced is other parent in contact with child? Yes/No

Please state name and address of other parent for legal communications.

Please indicate any other information we should have regarding parent's rights.

Is child adopted: Yes No

Is Wessex Primary School is your preferred choice of primary school? Yes No

If No, which school do you expect your child to attend?

Signed: Date:

Please contact the school secretary if any of the above information changes.