



<h2 style="margin: 0;">LOWTHER PRIMARY SCHOOL</h2> <h3 style="margin: 0;">NURSERY WAITING LIST REGISTRATION FORM</h3>
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Surname		First name	
Address			DOB
		Male / Female	
		Post code	
Parent 1 Name and title	Miss/Mrs/Ms/Mr/Dr etc	Occupation:	
Mobile No:		Email:	
Parent 2 Name and title	Miss/Mrs/Ms/Mr/Dr etc	Occupation:	
Mobile No:		Email:	
Name of Current Nursery or Playgroup (we will contact them for transition files):			
Siblings	d.o.b.	School attended	
The nursery place offer, if possible, will be based on the indicated preference	Morning 8.30am - 11.30am	Afternoon 12.30pm - 3.20pm	Either
<b>Please indicate below if your child has any medical conditions or allergies:</b> Asthma <input type="checkbox"/> Allergies (please specify) _____ <input type="checkbox"/> Eczema <input type="checkbox"/> On-going medical conditions (please specify) _____ <input type="checkbox"/>		<b>Please indicate below if your child has been or is due to be, seen by any of the below services:</b> Adoption or Fostering Team <input type="checkbox"/> Child Developmental Clinic <input type="checkbox"/> Community Paediatrician <input type="checkbox"/> Health visitor (name) _____ <input type="checkbox"/> Occupational Therapist <input type="checkbox"/> Social Worker (name) _____ <input type="checkbox"/> Speech and Language <input type="checkbox"/>	
<p>The information provided above will be treated in the strictest confidence. We may need to contact you for further details. It is in your child's best interest for us to be aware of any needs your child may have. Failure to disclose relevant information may affect the nursery provision for your child.</p>			
<p><b>PLEASE NOTE:</b> The acceptance of a nursery place does <b>NOT</b> guarantee a place in Reception class. There is a separate application process for starting primary school and this should be made through the Local Authority - further info available at <a href="http://www.richmond.gov.uk">www.richmond.gov.uk</a> or just ask at the school office</p>			